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Fill in this information to identify your c	ase:	
United States Bankruptcy Court for the: WESTERN DISTRICT OF OKLAHOMA		
Case number (if known):	Chapter you are filing under: Chapter 7 Chapter 11 Chapter 12 Chapter 13	Check if this is an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/22

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together--called a joint case--and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: **Identify Yourself About Debtor 1:** About Debtor 2 (Spouse Only in a Joint Case): Your full name Write the name that is on your Tony Terri government-issued picture First Name First Name identification (for example, **Edward** Lynne your driver's license or Middle Name Middle Name passport). Giddens **Giddens** Bring your picture Last Name Last Name identification to your meeting with the trustee. Suffix (Sr., Jr., II, III) Suffix (Sr., Jr., II, III) All other names you Terri have used in the last 8 First Name First Name years Middle Name Middle Name Include your married or **Shrock** maiden names and any Last Name Last Name assumed, trade names and "doing business as" names. Do NOT list the name of any First Name First Name separate legal entity such as a corporation, partnership, or Middle Name Middle Name LLC that is not filing this petition. Last Name Last Name Business name (if applicable) Business name (if applicable)

Business name (if applicable)

Business name (if applicable)

Case: 23-10950 Doc: 1 Filed: 04/17/23 Page: 2 of 86 Debtor 1 **Tony Edward Giddens** Debtor 2 Terri Lynne Giddens Case number (if known) **About Debtor 1:** About Debtor 2 (Spouse Only in a Joint Case): Only the last 4 digits of $xxx - xx - \underline{9} \underline{5} \underline{0} \underline{6}$ xxx - xx - <u>8</u> <u>8</u> <u>5</u> <u>6</u> your Social Security number or federal OR **Individual Taxpayer** Identification number 9xx - xx -9xx - xx -(ITIN) Your Employer **Identification Number** (EIN), if any. Where you live If Debtor 2 lives at a different address: 1137 SW 63rd Street Number Street Number Street **Oklahoma City** OK 73139 ZIP Code City ZIP Code Oklahoma County County If your mailing address is different from If Debtor 2's mailing address is different the one above, fill it in here. Note that the from yours, fill it in here. Note that the court court will send any notices to you at this will send any notices to you at this mailing mailing address. address. Number Street Number Street P.O. Box P.O. Box City ZIP Code City State State ZIP Code Why you are choosing Check one: Check one: this district to file for Over the last 180 days before filing this Over the last 180 days before filing this bankruptcy petition, I have lived in this district longer petition, I have lived in this district longer than in any other district. than in any other district. I have another reason. Explain. I have another reason. Explain. (See 28 U.S.C. § 1408.) (See 28 U.S.C. § 1408.) Tell the Court About Your Bankruptcy Case The chapter of the Check one: (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing

Part 2:

Bankruptcy Code you are choosing to file under

for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.

☐ Chapter 7

Chapter 11

Chapter 12

Chapter 13

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Debtor 1 Tony Edward Giddens Debtor 2 Terri Lynne Giddens				Case nun	nber (if known)		
8.	How you will pay the fee	ت ا	court pay w	pay the entire fee when I file my pe for more details about how you may p with cash, cashier's check, or money o If, your attorney may pay with a credit	oay. Typical order. If your	ly, if you are pay r attorney is subr	ing the fee yourself, you may mitting your payment on your
				d to pay the fee in installments. If y duals to Pay The Filing Fee in Installr			and attach the Application for
		_	By law than 1 fee in	uest that my fee be waived (You maw, a judge may, but is not required to, 150% of the official poverty line that a installments). If you choose this opt Fee Waived (Official Form 103B) an	waive your applies to you ion, you mus	fee, and may do ur family size and st fill out the App	so only if your income is less d you are unable to pay the
9.	Have you filed for bankruptcy within the		No				
	last 8 years?		Yes.				
		Distr	ict _		When		Case number
		D:-4-					
		Distr	ICT		when	MM / DD / YYYY	Case number
		Distr	ict		When		Case number
						MM / DD / YYYY	
10.	Are any bankruptcy cases pending or being	$\overline{\mathbf{V}}$	No				
	filed by a spouse who is		Yes.				
	not filing this case with you, or by a business	Debt	or _			Relationsh	ip to you
	partner, or by an	Distr	ict		When		Case number,
	affiliate?		_			MM / DD / YYYY	
		Debt	or _			Relationsh	ip to you
		Distr	ict _		When		Case number,
						MM / DD / YYYY	if known
11.	Do you rent your residence?		No. Yes.	Go to line 12. Has your landlord obtained an evict	ion judgmen	t against you?	
				✓ No. Go to line 12. ✓ Yes. Fill out Initial Statement A and file it as part of this bankru			Against You (Form 101A)

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	tor 1 Tony Edward Gidden tor 2 Terri Lynne Gidden						Case nu	mber (if known)		
Pa	Report About An	ıy Bı	ısine	sse	s You Own as	a Sole P	roprietor			
12.	Are you a sole proprietor of any full- or part-time business?				Part 4. ne and location of b	ousiness				
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or			_	ne of business, if any					
	LLC.			_						
	If you have more than one sole proprietorship, use a separate sheet and attach it to this petition.			Che	eck the appropriate Health Care Busi	iness (as d al Estate (a defined in ´ er (as defir	defined in 11 U.sis defined in 11	S.C. § 101(27A)) U.S.C. § 101(51 1(53A))		ode
13.	Are you filing under Chapter 11 of the Bankruptcy Code, and are you a small business debtor or a debtor as defined by 11 U.S.C. § 1182(1)? For a definition of small business debtor, see	cho are mos	osing t a sma st rece	to pro Il bus nt ba I thes I ar	oceed under Subch siness debtor or you lance sheet, stater se documents do n in not filing under C in filing under Chap	napter V so u are choos ment of ope ot exist, fol Chapter 11.	that it can set sing to proceed erations, cash-fllow the proced	appropriate dead d under Subchapt low statement, ar lure in 11 U.S.C.	lines. If yo er V, you m nd federal in § 1116(1)(E	nust attach your ncome tax return
	11 U.S.C. § 101(51D).		Yes.	l ar	Bankruptcy Code. m filing under Chap nkruptcy Code, and				-	
			Yes.		m filing under Chap nkruptcy Code, and					
Pa	Report If You Ov	vn o	r Hav	e Aı	ny Hazardous	Property	or Any Pro	perty That No	eeds Imn	nediate Attention
14.	Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or		No Yes.	Wh	at is the hazard?					
	safety? Or do you own any property that needs immediate attention?			lf ir	nmediate attention	is needed,	, why is it neede	ed?		
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?			Wh	ere is the property	? Number	Street			
						City			State	ZIP Code

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Debtor 1 **Tony Edward Giddens** Debtor 2 Terri Lynne Giddens Case number (if known) Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling 15. Tell the court About Debtor 1: About Debtor 2 (Spouse Only in a Joint Case): whether you You must check one: You must check one: have received a I received a briefing from an approved credit I received a briefing from an approved credit briefing about counseling agency within the 180 days before I counseling agency within the 180 days before I credit filed this bankruptcy petition, and I received a filed this bankruptcy petition, and I received a counseling. certificate of completion. certificate of completion. Attach a copy of the certificate and the payment Attach a copy of the certificate and the payment The law requires plan, if any, that you developed with the agency. plan, if any, that you developed with the agency. that you receive a □ I received a briefing from an approved credit ☐ I received a briefing from an approved credit briefing about credit counseling agency within the 180 days before I counseling agency within the 180 days before I counseling before filed this bankruptcy petition, but I do not have filed this bankruptcy petition, but I do not have you file for a certificate of completion. a certificate of completion. bankruptcy. You Within 14 days after you file this bankruptcy petition, Within 14 days after you file this bankruptcy petition, must truthfully you MUST file a copy of the certificate and payment you MUST file a copy of the certificate and payment check one of the plan, if any. plan, if any. following choices. If you cannot do so, ☐ I certify that I asked for credit counseling ☐ I certify that I asked for credit counseling you are not eligible services from an approved agency, but was services from an approved agency, but was to file. unable to obtain those services during the 7 unable to obtain those services during the 7 days after I made my request, and exigent days after I made my request, and exigent If you file anyway, circumstances merit a 30-day temporary circumstances merit a 30-day temporary the court can waiver of the requirement. waiver of the requirement. dismiss your case, To ask for a 30-day temporary waiver of the To ask for a 30-day temporary waiver of the you will lose requirement, attach a separate sheet explaining what requirement, attach a separate sheet explaining what whatever filing fee efforts you made to obtain the briefing, why you efforts you made to obtain the briefing, why you you paid, and your were unable to obtain it before you filed for were unable to obtain it before you filed for creditors can begin bankruptcy, and what exigent circumstances bankruptcy, and what exigent circumstances collection activities required you to file this case. required you to file this case. again. Your case may be dismissed if the court is Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, You must file a certificate from the approved agency, along with a copy of the payment plan you along with a copy of the payment plan you developed, if any. If you do not do so, your case developed, if any. If you do not do so, your case may be dismissed. may be dismissed. Any extension of the 30-day deadline is granted only Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days. for cause and is limited to a maximum of 15 days. □ I am not required to receive a briefing about ☐ I am not required to receive a briefing about credit counseling because of: credit counseling because of: ☐ Incapacity. I have a mental illness or a mental ☐ Incapacity. I have a mental illness or a mental deficiency that makes me deficiency that makes me incapable of realizing or making incapable of realizing or making rational decisions about finances. rational decisions about finances. ☐ Disability. My physical disability causes me My physical disability causes me □ Disability. to be unable to participate in a to be unable to participate in a briefing in person, by phone, or briefing in person, by phone, or through the internet, even after I through the internet, even after I reasonably tried to do so. reasonably tried to do so. Active duty. I am currently on active military Active duty. I am currently on active military duty in a military combat zone. duty in a military combat zone. If you believe you are not required to receive a If you believe you are not required to receive a briefing about credit counseling, you must file a briefing about credit counseling, you must file a

motion for waiver of credit counseling with the court.

motion for waiver of credit counseling with the court.

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Debtor 1 Tony Edward Gidden Debtor 2 Terri Lynne Giddens						Case number (if	know	n)
P	art 6:	Answer These Q	uest	ons for Reporting Pu	rpos	ses		
16.	What kind	d of debts do you	16a			sumer debts? Consumer de imarily for a personal, family,		re defined in 11 U.S.C. § 101(8) usehold purpose."
			16b			iness debts? Business debt ment or through the operation		debts that you incurred to obtain e business or investment.
			16c.	State the type of debts yo	u owe	e that are not consumer or bus	siness	s debts.
17.	7. Are you filing under Chapter 7?			No. I am not filing under	Chap	oter 7. Go to line 18.		
	any exemexcluded administrate paid available	stimate that after apt property is and rative expenses that funds will be for distribution ared creditors?		•	•	•	•	xempt property is excluded and to distribute to unsecured creditors?
18.		y creditors do nate that you		1-49 50-99 100-199 200-999		1,000-5,000 5,001-10,000 10,001-25,000		25,001-50,000 50,001-100,000 More than 100,000
19.	How muc estimate be worth	your assets to		\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million		\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million		\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion
20.	How muc estimate be?	h do you your liabilities to		\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million		\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million		\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion

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Debtor 1 Debtor 2	Tony Edward Gidden		Case number (if known)		
Part 7:	Sign Below				
or you		I have examined this petition, and I declare und and correct.	der penalty of perjury that the information provided is true		
		•	ware that I may proceed, if eligible, under Chapter 7, 11, 12, and the relief available under each chapter, and I choose to		
		If no attorney represents me and I did not pay of fill out this document, I have obtained and reach	or agree to pay someone who is not an attorney to help me I the notice required by 11 U.S.C. § 342(b).		
		I request relief in accordance with the chapter of	of title 11, United States Code, specified in this petition.		
		I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.			
		X /s/ Tony Edward Giddens Tony Edward Giddens, Debtor 1	X /s/ Terri Lynne Giddens Terri Lynne Giddens, Debtor 2		

Executed on **04/17/2023**

MM / DD / YYYY

Executed on **04/17/2023**

MM / DD / YYYY

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Debtor 1 Debtor 2	Tony Edward Gid Terri Lynne Gidde		Case number	(if know	n)			
or your a	ttorney, if you are ed by one	I, the attorney for the debtor(s) n eligibility to proceed under Chap relief available under each chap	ter 7, 11, 12, or 13 of title 11, Un	nited Sta	ites Code, and have explained the			
f you are not represented by an attorney, you do not need o file this page.		the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applied certify that I have no knowledge after an inquiry that the information in the schedules filed with the price is incorrect.						
		X /s/ O. Clifton Gooding Signature of Attorney for Deb	tor	Date	04/17/2023 MM / DD / YYYY			
		O. Clifton Gooding Printed name						
		The Gooding Law Firm, I	P.C.					
		204 N. Robinson Avenue	, Suite 1235					
		- Sileet						
		Oklahoma City	OK.		73102			
		City	State	е	ZIP Code			

Email address cgooding@goodingfirm.com

OK State

Contact phone (405) 948-1978

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Debtor 1 Tory Edward Giddens Debtor 2 Terri Lynne Giddens
Debtor 2 (Spouse, if filing) First Name
Check if this is an amended filing Check if this is an amended filing
Official Form 106A/B Schedule A/B: Property 12/15 In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In 1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property? No. Go to Part 2. Yes. Where is the property? 2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages you have attached for Part 1. Write that number here
Official Form 106A/B Schedule A/B: Property 12/15 In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filling together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In 1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property? No. Go to Part 2: No. Go to Part 2: Yes. Where is the property? 2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages you have attached for Part 1. Write that number here
Official Form 106A/B Schedule A/B: Property 12/15 In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think if fits best. Be as complete and accurate as possible. If two married people are filling together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest in 1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property? No. Go to Part 2. Yes. Where is the property? 2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages you have attached for Part 1. Write that number here
Schedule A/B: Property In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filling together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In 1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property? No. Go to Part 2. Yes. Where is the property? 2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages you have attached for Part 1. Write that number here
Schedule A/B: Property In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filling together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In 1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property? No. Go to Part 2. Yes. Where is the property? 2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages you have attached for Part 1. Write that number here
In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In 1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property? No. Go to Part 2. Yes. Where is the property? 2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages you have attached for Part 1. Write that number here
the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filling together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In 1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property? No. Go to Part 2. Yes. Where is the property? 2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages you have attached for Part 1. Write that number here
1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property? No. Go to Part 2. Yes. Where is the property? 2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages you have attached for Part 1. Write that number here
No. Go to Part 2.
Yes. Where is the property? 2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages you have attached for Part 1. Write that number here
2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages you have attached for Part 1. Write that number here
Part 2: Describe Your Vehicles Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases. 3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles No Yes 3.1. Who has an interest in the property? Make: Ford Check one. Check one. Debtor 1 only Creditors Who Have Claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property. Year: 2017 Debtor 1 only Current value of the entire property? Debtor 1 and Debtor 2 only At least one of the debtors and another \$23,700.00 \$23,700.00 Check if this is community property
Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases. 3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles No Yes 3.1. Who has an interest in the property? Check one. Debtor 1 only Year: 2017 Debtor 1 only Debtor 2 only Approximate mileage: 100,000 Debtor 2 only At least one of the debtors and another Other information: 2017 Ford F150 (approx. 100,000 Check if this is community property
you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases. 3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles No Yes 3.1. Who has an interest in the property? Check one. Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property. Year: 2017 Approximate mileage: 100,000 Other information: Check if this is community property Carset utility vehicles, motorcycles Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property. Current value of the entire property? \$23,700.00 \$23,700.00
3.1. Who has an interest in the property? Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Check one. Check one. Creditors Who Have Claims Secured by Property. Year: 2017 Debtor 1 only Current value of the entire property? Current value of the portion you own? Approximate mileage: 100,000 Debtor 2 only At least one of the debtors and another Other information: Check if this is community property Who has an interest in the property? Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property. Current value of the entire property? portion you own? \$23,700.00 \$23,700.00
3.1. Make: Ford Check one. Check one. Model: F150 Debtor 1 only Current value of the entire property? Approximate mileage: Other information: 2017 Check if this is community property Who has an interest in the property? Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property. Current value of the entire property? portion you own? \$23,700.00 \$23,700.00
Make: Ford Check one. amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property. Model: F150 Debtor 1 only Current value of the entire property? Approximate mileage: 100,000 Debtor 2 only At least one of the debtors and another Other information: 2017 Check if this is community property
Model: F150 Debtor 1 only Creditors Who Have Claims Secured by Property. Year: 2017 Debtor 2 only Current value of the entire property? Current value of the entire property? Portion you own? Approximate mileage: 100,000 At least one of the debtors and another Other information: 2017 Ford F150 (approx. 100,000 Check if this is community property
Year: Approximate mileage: Other information: Year: Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Current value of the entire property? At least one of the debtors and another Current value of the entire property? \$23,700.00\$ \$23,700.00
Approximate mileage: 100,000 Debtor 1 and Debtor 2 only entire property? portion you own? At least one of the debtors and another \$23,700.00 \$23,700.00 Check if this is community property
Other information: 2017 Ford F150 (approx. 100,000
2017 Ford F150 (approx. 100,000
1137 SW 63rd Street
Oklahoma City, OK 73139
3.2. Who has an interest in the property? Do not deduct secured claims or exemptions. Put the
Make: Jeep Check one. amount of any secured claims on Schedule D: Model: Repeate Check one. amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.
Model: Renegade Debtor 2 only Current value of the Current value of the
Year: 2020 ☐ Debtor 1 and Debtor 2 only entire property? portion you own?
Approximate mileage: 35,000 At least one of the debtors and another \$21,325.00
Other information: 2020 Jean Benegado (approx. 25 000
2020 Jeep Renegade (approx. 35,000 Check if this is community property (see instructions)
1137 SW 63rd Street

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	-	Edward Giddens ynne Giddens	Ca	se number (if known)	
3.3. Mak		Indian Roadmaster	Who has an interest in the property? Check one. Debtor 1 only	Do not deduct secured clai amount of any secured cla Creditors Who Have Claim	ims on Schedule D:
Yea		2018	Debtor 2 only	Current value of the	Current value of the
App	roximate mileage	30,000	Debtor 1 and Debtor 2 only At least one of the debtors and another	entire property? s19,850.00	portion you own? \$19,850.00
Othe	er information:			φ19,030.00	ψ 19,030.00
30,0 113	000 miles) 7 SW 63rd St	master (approx.	Check if this is community property (see instructions)		
4.	ahoma City, Ol Watercraft, airc		Vs and other recreational vehicles, other vel	hicles, and accessories	
			onal watercraft, fishing vessels, snowmobiles, r		
5.			u own for all of your entries from Part 2, inc or Part 2. Write that number here		\$64,875.00
Pa	art 3: Desc	ribe Your Persona	al and Household Items	'	
Doy	you own or have	any legal or equitable	interest in any of the following items?		Current value of the portion you own? Do not deduct secured claims or exemptions.
6.	•	ds and furnishings or appliances, furniture,	linens, china, kitchenware		
	☐ No ☑ Yes. Descri	be See continuat	ion page(s).		\$3,000.00
7.	musi		o, video, stereo, and digital equipment; compu devices including cell phones, cameras, medi		-
	☐ No ☑ Yes. Descri	1137 SW 63rd			\$300.00
		Oklahoma Cit	y, OK 73139		
8.	•	ques and figurines; pain	tings, prints, or other artwork; books, pictures, od collections; other collections, memorabilia, co	•	
	✓ No Yes. Descri	be]
9.	Examples: Spor		se, and other hobby equipment; bicycles, pool ry tools; musical instruments	tables, golf clubs, skis;	
	✓ No ☐ Yes. Descri	be]
10.	Firearms Examples: Pisto	ols, rifles, shotguns, am	munition, and related equipment		_
	✓ No ☐ Yes. Descri	be]

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	tor 1 tor 2	Tony Edwa Terri Lynn	ırd Giddens - Giddens		
		TCTT Lytin	Olddella	Case number (if known)	
11.	Clothe Examp		clothes, furs,	leather coats, designer wear, shoes, accessories	
	☐ No ☑ Ye	es. Describe	1137 SW	apparel 63rd Street a City, OK 73139	\$600.00
12.		gold, silve		ume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems,	
	✓ No	s. Describe			
13.	Examp	urm animals bles: Dogs, cat	s, birds, horse	es	-
	✓ No	s. Describe]
14.	Any ot		and househo	old items you did not already list, including any health aids you	
	_	s. Give specif			1
]
15.			-	r entries from Part 3, including any entries for pages you have mber here	\$3,900.00
Pa	art 4:	Describe	Your Fina	ncial Assets	
Doy	ou owi	n or have any	legal or equi	table interest in any of the following?	Current value of the portion you own? Do not deduct secured claims or exemptions.
16.	Cash Examp	oles: Money yo petition	u have in you	r wallet, in your home, in a safe deposit box, and on hand when you file your	
	✓ No			Cash:	
17.	Depos Examp				
	□ No ✓ Ye) s		Institution name:	
	17	7.1. Checkir	ng account:	Checking account with MidFirst Bank account ending in 5358	\$458.31
	17	7.2. Checkir	ng account:	Checking account Arvest Bank account ending in 7617	\$147.10

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	tor 1 Tony Edward G tor 2 Terri Lynne Gid		Case number (if known)	
40	Panda mutual funda ara			
10.	Bonds, mutual funds, or p Examples: Bond funds, inv	•	s n brokerage firms, money market accounts	
		Institution or issuer n	name:	
19.	Non-publicly traded stock	k and interests in inco	orporated and unincorporated businesses, including	
	an interest in an LLC, par No	tnership, and joint ve	enture	
	Yes. Give specific			
	information about them	Name of entity:	% of ownership:	
20.	Negotiable instruments inc	lude personal checks,	egotiable and non-negotiable instruments cashiers' checks, promissory notes, and money orders. t transfer to someone by signing or delivering them.	
	☑ No			
	Yes. Give specific information about			
0.4	them	Issuer name:		
21.	Retirement or pension ac Examples: Interests in IRA profit-sharing p	, ERISA, Keogh, 401(I	k), 403(b), thrift savings accounts, or other pension or	
	☐ No ☑ Yes. List each			
		Type of account:	Institution name:	
		401(k) or similar plan:	Soonersave 457 Plan	\$4,703.98
		401(k) or similar plan:	Retirement account RIaDyne LLC 401 (k) Plan	\$15,252.42
22.		eposits you have made	e so that you may continue service or use from a company ent, public utilities (electric, gas, water), telecommunications	
	☑ No			
23	Yes		stitution name or individual: ment of money to you, either for life or for a number of years)	
_0.	☑ No			
0.4	Yes			
24.	26 U.S.C. §§ 530(b)(1), 529		a qualified ABLE program, or under a qualified state tuition pro	gram.
	✓ No Yes	Institution name and	description. Separately file the records of any interests. 11 U.S.C.	§ 521(c)
25.	_	e interests in propert	y (other than anything listed in line 1), and rights or	
	☑ No			
	Yes. Give specific information about them	1		
26.	Examples: Internet domain		s, and other intellectual property; oceeds from royalties and licensing agreements	
	Yes. Give specific information about them	1		
27.	Licenses, franchises, and Examples: Building permit		gibles cooperative association holdings, liquor licenses, professional licens	ses
	✓ No ✓ Yes. Give specific information about them	1		

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Deb Deb	tor 1 tor 2	Tony Edward Giddens Terri Lynne Giddens	Case number (if known)		
Mor	ey or p	roperty owed to you?			Current value of the portion you own? Do not deduct secured claims or exemptions.
28.	Tax ref	funds owed to you			
29.	abo you and	s. Give specific information out them, including whether u already filed the returns d the tax years	S L	Federal: State: Local:	
	Example No.	·	limony, spousal support, child support, maintenance, divorce settlement, p	property	settlement
		s. Give specific information	Alimony: Maintenance Support: Divorce settl Property sett	lement:	
30.	Example ✓ No	compensation, Social Se	u insurance payments, disability benefits, sick pay, vacation pay, workers' ecurity benefits; unpaid loans you made to someone else		
31.	Example No Yes	s. Name the insurance mpany of each policy	insurance; health savings account (HSA); credit, homeowner's, or renter's ompany name: Beneficiary:		nce rrender or refund value:
32.	If you a entitled No	are the beneficiary of a living of the to receive property because	e you from someone who has died trust, expect proceeds from a life insurance policy, or are currently someone has died		
33.	Claims Example No	s against third parties, whet les: Accidents, employment	her or not you have filed a lawsuit or made a demand for payment disputes, insurance claims, or rights to sue		
34.	rights t	to set off claims	d claims of every nature, including counterclaims of the debtor and		
35.	_	nancial assets you did not a	Iroady list		
JJ.	✓ No	-	ineauy not		
	_				

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	tor 1 tor 2	Tony Edward Giddens Terri Lynne Giddens Case number (if known)	
36.		e dollar value of all of your entries from Part 4, including any entries for pages you have d for Part 4. Write that number here	\$20,561.81
Pa	art 5:	Describe Any Business-Related Property You Own or Have an Interest In. List any	real estate in Part 1.
37.	✓ No.	own or have any legal or equitable interest in any business-related property? Go to Part 6. Go to line 38.	
			Current value of the portion you own? Do not deduct secured claims or exemptions.
38.		nts receivable or commissions you already earned	
	✓ No	. Describe	
39.		equipment, furnishings, and supplies es: Business-related computers, software, modems, printers, copiers, fax machines, rugs, telephones, desks, chairs, electronic devices	
	✓ No ☐ Yes	. Describe	
40.	Machin	ery, fixtures, equipment, supplies you use in business, and tools of your trade	
	✓ No ☐ Yes	. Describe	
41.	Invento	ry	
	✓ No	. Describe	
	_		
42.		s in partnerships or joint ventures	
	✓ No ☐ Yes	. Describe Name of entity: % of ownership:	
43.	Custon	ner lists, mailing lists, or other compilations	
	✓ No ☐ Yes	Do your lists include personally identifiable information (as defined in 11 U.S.C. § 101(41A))? No Yes. Describe	
44.	Any bu	siness-related property you did not already list	1
	☑ No ☐ Yes	s. Give specific information.	
45.		e dollar value of all of your entries from Part 5, including any entries for pages you have d for Part 5. Write that number here	\$0.00
Pá		Describe Any Farm- and Commercial Fishing-Related Property You Own or Have ar If you own or have an interest in farmland, list it in Part 1.	n Interest In.
46.	Do you	own or have any legal or equitable interest in any farm- or commercial fishing-related property?	
	ين ا	Go to Part 7. Go to line 47.	

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Deb	btor 1	Tony Edward Giddens		
Deb	btor 2	Terri Lynne Giddens	Case number (if known)	
				Current value of the portion you own? Do not deduct secured claims or exemptions.
47.	Farm a		fiah	
	Example No	les: Livestock, poultry, farm-raised fi	ISII	
	Yes]
48.	Crops-	-either growing or harvested		-
	✓ No			٦
		s. Give specific prmation		
49.	Farm a	nd fishing equipment, implements	s, machinery, fixtures, and tools of trade	-
	☑ No			٦
	☐ Yes	3		
50.	Farm a	nd fishing supplies, chemicals, an	nd feed	J
	☑ No			7
	Yes	š		
51.	Any far	rm- and commercial fishing-related	d property you did not already list	-
	☑ No			٦
		s. Give specific ormation		
52.			s from Part 6, including any entries for pages you have	\$0.00
_	dilaciie	u for Part o. Write that humber he	31e	<u> </u>
P	art 7:	Describe All Property You C	Own or Have an Interest in That You Did Not List Above	
53.	-	have other property of any kind your les: Season tickets, country club me	•	
	☑ No			
	☐ Yes	s. Give specific information.	1	
54.	Add th	e dollar value of all of your entries	s from Part 7. Write that number here	\$0.00

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Debtor 1 Debtor 2		Tony Edward Giddens Terri Lynne Giddens	Case nu	umber (if known)		
Par	t 8:	List the Totals of Each Part of this Form				
55. P	'art 1:	Total real estate, line 2		≯		\$0.00
56. P	art 2:	Total vehicles, line 5	\$64,875.00			
57. P	art 3:	Total personal and household items, line 15	\$3,900.00			
58. P	'art 4:	Total financial assets, line 36	\$20,561.81			
59. P	'art 5:	Total business-related property, line 45	\$0.00			
60. P	art 6:	Total farm- and fishing-related property, line 52	\$0.00			
61. P	'art 7:	Total other property not listed, line 54	+\$0.00			
62. T	[⊺] otal p	ersonal property. Add lines 56 through 61	\$89,336.81	Copy personal property total	+	\$89,336.81
63. T	「otal o	of all property on Schedule A/B. Add line 55 + line 62				\$89,336.81

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Debtor 1 Debtor 2		Tony Edward Giddens Terri Lynne Giddens	Case number (if known)	
6.	House	ehold goods and furnishings (details):		
	Hous	ehold goods & furnishings	_	\$1,500.00
	1137	SW 63rd Street		
	Oklah	noma City, OK 73139		
	Hous	ehold Furnishings		\$1,500.00
	1137	SW 63rd Street	_	<u> </u>
	Oklah	noma City, OK 73139		

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Debtor 1	Tony First Name	Edward Middle Name	Giddens Last Name			
Debtor 2	Terri	Lynne	Giddens			
(Spouse, if filing)		Middle Name	Last Name N DISTRICT OF O	ΚΙ ΔΙ	нома	_
Case number (if known)		Tule. WESTER	N BIOTRIOT OF O		TOWA	Check if this is an amended filing
Official Form	106C					
		ertv You Cl	aim as Exemp	ot		04
		,				-
sing the property	you listed on <i>Sch</i> ill out and attach t	nedule A/B: Prope to this page as m	erty (Official Form 10	6A/B)	as your source, list the	esponsible for supplying correct information e property that you claim as exempt. If m ssary. On the top of any additional pages
to state a speci xempted up to the eceive certain be xemption of 100°	fic dollar amoun ne amount of any nefits, and tax-e % of fair market	t as exempt. Alt applicable stat xempt retiremer value under a la	ternatively, you may utory limit. Some ex nt fundsmay be unl w that limits the exe	clair cemp limite emptic	n the full fair market tionssuch as those d in dollar amount.	you claim. One way of doing so value of the property being for health aids, rights to dowever, if you claim an ar amount and the value of the le statutory amount.
Part 1: Ide	entify the Prop	perty You Cla	im as Exempt			
Which set of	exemptions are	you claiming?	Check one only,	even	if your spouse is filing	with you.
✓ You are	claiming state and	d federal nonbanl	Check one only, kruptcy exemptions. J.S.C. § 522(b)(2)		. ,	with you.
You are	claiming state and	d federal nonbanl exemptions. 11 U	kruptcy exemptions. J.S.C. § 522(b)(2)	11 U.	. ,	ŕ
You are You ar	claiming state and claiming federal e erty you list on so of the property a	d federal nonbant exemptions. 11 L Schedule A/B thand	kruptcy exemptions. J.S.C. § 522(b)(2)	11 U. npt, f Ame	S.C. § 522(b)(3)	ŕ
You are	claiming state and claiming federal e erty you list on so of the property a	d federal nonbant exemptions. 11 L Schedule A/B thand	kruptcy exemptions. J.S.C. § 522(b)(2) at you claim as exer Current value of the portion you	npt, f Ame	S.C. § 522(b)(3) ill in the information ount of the mption you claim	below.
You are You ar	claiming state and claiming federal effects on the claiming state and claiming federal effects on the claiming state and clai	d federal nonbani exemptions. 11 U Schedule A/B th and line on rty	kruptcy exemptions. J.S.C. § 522(b)(2) at you claim as exer Current value of the portion you own Copy the value from	npt, f Ame	S.C. § 522(b)(3) iill in the information ount of the mption you claim eck only one box for	below.
For any proprief description: 017 Ford F150 137 SW 63rd Sklahoma City, ne from Schedule rief description:	claiming state and claiming federal effects on Softhe property at lists this property (approx. 100,0) treet OK 73139 of A/B:3.1	d federal nonbani exemptions. 11 USchedule A/B thand line on rty	kruptcy exemptions. J.S.C. § 522(b)(2) at you claim as exer Current value of the portion you own Copy the value from Schedule A/B	npt, f Ame	S.C. § 522(b)(3) Fill in the information ount of the mption you claim sck only one box for the exemption \$0.00 100% of fair market value, up to any applicable statutory limit \$840.00	below. Specific laws that allow exemption
For any proprief description: 017 Ford F150 137 SW 63rd Sklahoma City, ne from Schedule rief description: 018 Indian Roadiles)	claiming state and claiming federal effects on the claiming state and claiming federal effects on the claiming state and clai	d federal nonbanic exemptions. 11 USchedule A/B thand line on rty 00 miles)	kruptcy exemptions. J.S.C. § 522(b)(2) at you claim as exer Current value of the portion you own Copy the value from Schedule A/B \$23,700.00	Ampt, f Amexe	S.C. § 522(b)(3) Fill in the information ount of the mption you claim The eck only one box for the exemption \$0.00 100% of fair market value, up to any applicable statutory limit	below. Specific laws that allow exemption Okla. Stat. tit. 31 § 1(A)(13)
You are You ar	claiming state and claiming federal elerty you list on so of the property at lists this property (approx. 100,0) treet OK 73139 ele A/B:	d federal nonbanic exemptions. 11 USchedule A/B thand line on rty 00 miles)	kruptcy exemptions. J.S.C. § 522(b)(2) at you claim as exer Current value of the portion you own Copy the value from Schedule A/B \$23,700.00	npt, f Ame exe	S.C. § 522(b)(3) Fill in the information fount of the mption you claim S.C. § 522(b)(3) Fill in the information for the information with the information with exemption \$0.00 100% of fair market value, up to any applicable statutory limit \$840.00 100% of fair market value, up to any	below. Specific laws that allow exemption Okla. Stat. tit. 31 § 1(A)(13)

Are you claiming a homestead exemption of more than \$189,050 f.

(Subject to adjustment on 4/01/25 and every 3 years after that for cases filed on or after the date of adjustment.)

(,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	 	 , 0 ,00	 	 	
$\overline{\mathbf{V}}$	No					

w.	
	Ye

Γ	Yes.	Did you	acquire th	e property	covered by	the exemption	n within 1,	,215 days	before you	filed this ca	ise?

□ No □ Yes

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Debtor 2 Terri Lynne Giddens		Case number (if known)				
Part 2: Additional Page						
Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own		ount of the mption you claim	Specific laws that allow exemption		
	Copy the value from Schedule A/B		ck only one box for h exemption			
Brief description: Household goods & furnishings 1137 SW 63rd Street Oklahoma City, OK 73139 Line from Schedule A/B:6	\$1,500.00		\$1,500.00 100% of fair market value, up to any applicable statutory limit	Okla. Stat. tit. 31 § 1(A)(3)		
Brief description: Household Furnishings 1137 SW 63rd Street Oklahoma City, OK 73139 Line from Schedule A/B:6	\$1,500.00		\$0.00 100% of fair market value, up to any applicable statutory limit	Okla. Stat. tit. 31 § 1(A)(3)		
Brief description: Televisions, (2) Cell Phones, Desktop, Laptop 1137 SW 63rd Street Oklahoma City, OK 73139 Line from Schedule A/B:7	\$300.00		\$300.00 100% of fair market value, up to any applicable statutory limit	Okla. Stat. tit. 31 § 1(A)(3)		
Brief description: Wearing apparel 1137 SW 63rd Street Oklahoma City, OK 73139 Line from Schedule A/B:11	\$600.00		\$600.00 100% of fair market value, up to any applicable statutory limit	Okla. Stat. tit. 31 § 1(A)(7)		
Brief description: Checking account with MidFirst Bank account ending in 5358 Line from Schedule A/B: 17.1	\$458.31		\$343.73 100% of fair market value, up to any applicable statutory limit	Okla. Stat. tit. 12 § 1171.1		
Brief description: Checking account Arvest Bank account ending in 7617 Line from Schedule A/B: 17.2	<u>\$147.10</u>		\$110.32 100% of fair market value, up to any applicable statutory limit	Okla. Stat. tit. 12 § 1171.1		
Brief description: Soonersave 457 Plan Line from Schedule A/B:21	\$4,703.98		\$4,703.98 100% of fair market value, up to any applicable statutory limit	Okla. Stat. tit. 31 § 1(A)(20), (23-24), 60 Okla. Stat § 328		
Brief description: Retirement account RlaDyne LLC 401 (k) Plan Line from Schedule A/B:	\$15,252.42		\$15,252.42 100% of fair market value, up to any applicable statutory limit	Okla. Stat. tit. 31 § 1(A)(20), (23-24), 60 Okla. Stat § 328		

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		416				
Fill in this info	ormation to ide	ntify your case	:			
Debtor 1	Tony First Name	Edward Middle Name	Giddens			
	First Name	Middle Name	Last Name			
Debtor 2 (Spouse, if filing)	Terri First Name	Lynne Middle Name	Giddens Last Name			
(opouse, ii iiiiig)	T HOL TAINIO	Middle Hame	Edot Namo			
United States Bar	nkruptcy Court for th	e: WESTERN DI	STRICT OF OKLAHO	<u>MA</u>		
Case number					☐ Check if this is	s an
(if known)					amended filing	
Official Form	106D					
Schedule D:	Creditors W	ho Have Cla	ims Secured by	Property		12/15
On the top of any 1. Do any credit □ No. Chee □ Yes. Fill Part 1: Lis 2. List all secure claim, list the coreditor has a	additional pages, we cors have claims see ck this box and subrin all of the informate that All Secured Cled claims. If a credit creditor separately for particular claim, list ible, list the claims in	cured by your proint this form to the dion below. aims itor has more than or each claim. If me the other creditors	court with your other sche court with your other sche one secured one secured ore than one in Part 2. As	vn).		
2.1		Describe the	property that	\$20,420,00	¢04 205 00	\$0.044.00
Capital One Auto	o Financo	secures the	claim:	\$30,139.00	\$21,325.00	\$8,814.00
Creditor's name		—— 2020 Jeep	Renegade			
Attn: Bankruptc: Number Street	у					
7933 Preston Ro	t					
		As of the da	te you file, the claim is:	Check all that apply.		
	TV 75004	Continge				
Plano City	TX 75024 State ZIP Code	Unliquida				
Who owes the deb		Disputed				
☐ Debtor 1 only			n. Check all that apply.ment you made (such as	mortagae or secured	car loan)	
Debtor 2 only			lien (such as tax lien, m		car loair)	
Debtor 1 and D	ebtor 2 only		nt lien from a lawsuit	oonanio o nonj		
	the debtors and and	ther —	cluding a right to offset)			
Check if this of to a communit		Automo				
Date debt was inc	urred 10/01/202	0 Last 4 digits	of account number	1 0 0 1		

Add the dollar value of your entries in Column A on this page. Write that number here:

\$30,139.00

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	Case number (if	known)			
this page, number them ous page.	Column A Amount of claim Do not deduct the value of collateral	Column B Value of collateral that supports this claim	Column C Unsecured portion If any		
Describe the property that secures the claim: 2017 Ford F150	\$32,213.00	\$23,700.00	\$8,513.00		
As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as mortgage or secured car loan) Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit Other (including a right to offset) Automobile					
Last 4 digits of account number	9 1 5 1				
secures the claim: Household furnishings	\$2,419.00	\$1,500.00	\$919.00		
☐ Contingent ☐ Unliquidated ☐ Disputed Nature of lien. Check all that apply. ☐ An agreement you made (such as	mortgage or secured	car loan)			
	Describe the property that secures the claim: 2017 Ford F150 As of the date you file, the claim is: Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as Statutory lien (such as tax lien, me Judgment lien from a lawsuit Other (including a right to offset) Automobile Last 4 digits of account number Describe the property that secures the claim: Household furnishings As of the date you file, the claim is: Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as Statutory lien (such as tax lien, me Judgment lien from a lawsuit Judgment lien from a lawsuit Other (including a right to offset)	this page, number them bus page. Describe the property that secures the claim: 2017 Ford F150 As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as mortgage or secured Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit Other (including a right to offset) Automobile Last 4 digits of account number Describe the property that secures the claim: Household furnishings As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as mortgage or secured \$2,419.00 As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as mortgage or secured Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit Other (including a right to offset)	Amount of claim Do not deduct the value of collateral that supports this claim Describe the property that secures the claim: 2017 Ford F150 As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Nature of lien. Check all that apply. Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit Other (including a right to offset) Automobile Last 4 digits of account number Describe the property that secures the claim: Household furnishings As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Nature of lien. Check all that apply. As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as mortgage or secured car loan) Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit Other (including a right to offset)		

Add the dollar value of your entries in Column A on this page. Write that number here:

\$34,632.00

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	Fony Edward Giddens Ferri Lynne Giddens	Case number (if known)			
Part 1:	Additional Page After listing any entries on sequentially from the previous		Column A Amount of claim Do not deduct the value of collateral	Column B Value of collateral that supports this claim	Column C Unsecured portion If any
Performanc Creditor's name 1515 W 22nd Number Stree	d Street	Describe the property that secures the claim: 2016 Indian Roadmaster	\$19,010.00	\$19,850.00	
Debtor 1 c Debtor 2 c Debtor 1 a At least or	and Debtor 2 only the of the debtors and another this claim relates munity debt	As of the date you file, the claim is: Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as Statutory lien (such as tax lien, modulus) Judgment lien from a lawsuit Other (including a right to offset) Recreational	mortgage or secured	car loan)	

Add the dollar value of your entries in Column A on this page. Write that number here:

\$19,010.00

If this is the last page of your form, add the dollar value totals from all pages. Write that number here:

\$83,781.00

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Fill in this info	ormation to ider	ntify your ca	ase:			
Debtor 1	Tony	Edward	Giddens			
	First Name	Middle Name	Last Name			
Debtor 2	Terri	Lynne	Giddens			
(Spouse, if filing)	First Name	Middle Name	Last Name			
United States Bar	nkruptcy Court for the	e: <u>WESTERN</u>	DISTRICT OF OKLAHOMA			
Case number				П	Check if this is a	an
(if known)				_	amended filing	
Official Form	106E/F					
Schedule E/	F: Creditors \	Who Have	Unsecured Claims			12/15
If more space is not to this page. On the Part 1:	eeded, copy the Pa he top of any additi	rt you need, fi onal pages, w		boxes on the left. At		, , ,
1. Do any credit	ors have priority ur	secured clain	ns against you?			
☐ No. Go to	o Part 2.					
Yes.						
claim. For eac show both pric more space is	ch claim listed, identi ority and nonpriority a	fy what type of imounts. As m insecured clain	creditor has more than one priority u claim it is. If a claim has both priori such as possible, list the claims in al ns, fill out the Continuation Page of I	ty and nonpriority amo	ounts, list that clair ding to the credito	n here and or's name. If
(For an explan	nation of each type o	f claim, see the	e instructions for this form in the instr	uction booklet.		
				Total claim	Priority amount	Nonpriority amount
2.1				\$5,000.00	\$5,000.00	\$0.00
IRS			Last 4 digits of account number			
Priority Creditor's Name PO Box 7346	е		_			
Number Street			When was the debt incurred?	12/31/2021	-	
			As of the date you file, the claim	is: Check all that app	ly.	
			Contingent			
Philadelphia		101-7346 Code	Unliquidated Disputed			
City Who incurred the			Type of PRIORITY unsecured cla	im·		
☐ Debtor 1 only			Domestic support obligations	••••		
Debtor 2 only Debtor 1 and D	lehtor 2 only		▼ Taxes and certain other debts y		ent	
	the debtors and ano	ther	Claims for death or personal in intoxicated	jury while you were		
ш	laim is for a comm		Other. Specify			
Is the claim subject	ct to offset?		_			
✓ No ☐ Yes						

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Debtor 1 Debtor 2	Tony Edwar Terri Lynne				Case number (if kno	own)	
Part 1:	Your PRIC	ORITY	Unsecured C	Claims Continuation Page			
After listing previous pa	•	n this pa	age, number the	m sequentially from the	Total claim	Priority amount	Nonpriority amount
2.2					\$3,000.0	93,000.00	\$0.00
The Goodi	ing Law Firm,	, P.C.		 Last 4 digits of account numbe 	r		
204 N. Rol	oinson Avenu Street	ıe, Suit	e 1235	_ When was the debt incurred?	01/06/2023	_	
Oklahoma	City	ОК	73102	As of the date you file, the clair Contingent Unliquidated Disputed	n is: Check all that a	apply.	
City	ed the debt?	State Check	ZIP Code	ш .	Latin.		
Debtor 2 Debtor 2 Debtor 2 Debtor 3 Debtor 3 Debtor 3 Debtor 4 Debtor 3 Debtor 3 Debtor 3	1 only	only ors and for a co	another	Type of PRIORITY unsecured c □ Domestic support obligations □ Taxes and certain other debt □ Claims for death or personal intoxicated □ Other. Specify Attorney fees for this care	s s you owe the goven injury while you were		

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Debtor 1 Debtor 2	Tony Edward Giddens Terri Lynne Giddens	Case number (if known)
Part 2:	List All of Your NONPRIORITY	Y Unsecured Claims
☐ No ☑ Ye 4. List all If a cree type of	of your nonpriority unsecured claims i ditor has more than one nonpriority unsec claim it is. Do not list claims already inclu	Claims against you? Submit this form to the court with your other schedules. In the alphabetical order of the creditor who holds each claim. Bured claim, list the creditor separately for each claim. For each claim listed, identify what uded in Part 1. If more than one creditor holds a particular claim, list the other creditors in insecured claims, fill out the Continuation Page of Part 2.
Nonpriority Cre Attn: Bank Number S 3100 SW 5 Oklahoma City Who incurre Debtor 1 Debtor 2 Debtor 1 At least	ruptcy Street 9th St. City OK 73119 State ZIP Code ed the debt? Check one. only	\$354.00 Last 4 digits of account number
4.2 Ameripath Nonpriority Cre Diagnostic Number S PO Box 74 Cincinnati City Who incurre Debtor 1 Debtor 2 Debtor 1 At least	Pathology Services Street 0976 OH 45274-0976 State ZIP Code ch the debt? Check one. only	\$122.60 Last 4 digits of account number 8 8 8 0 8 When was the debt incurred? 05/14/2020 As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Medical Bill

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After flisting any entries on this page, number them sequentially from the previous page. A	Debtor 1 Tony Edward Giddens Debtor 2 Terri Lynne Giddens	Case number (if known)	
Ask Addition Additi	Part 2: Your NONPRIORITY Unsecu	red Claims Continuation Page	
Last 4 digits of account number			Total claim
August Contingent Conting	4.3		\$51.88
Nospecific Name PO Box 66607 Northern Silvert	AMR. LLC	Last 4 digits of account number 7 5 7 4	
As of the date you file, the claim is: Check all that apply. Contingent Delator 1 only Delator 1 and Delator 2 only All lasat one of the delators and another Check if this claim is for a community debt is the claim subject to offset? As of the date you file, the claim is: Check all that apply. Contingent Delator 1 and Delator 2 only Delator 1 and Delator 2 only All lasst one of the delators and another Check if this claim is for a community debt is the claim subject to offset? As of the date you file, the claim is: Check all that apply. Contingent Delator 2 only Modical Bill Student loans Delator 1 and Delator 2 only Modical Bill Last 4 digits of account number Delator 1 only Delator 1 only Delator 2 only Modical Bill Last 4 digits of account number Delator 1 only Delator 2 only Delator 2 only Delator 2 only Delator 2 only Delator 3 only Delator 4 only Delator 4 only Delator 4 only Delator 5 only Delator 5 only Delator 6 only Delator 7 only Delator 6 only Delator 7 only Delator 7 only Delator 7 only Delator 8 only Delator 9 only Delator 1 only Delator 1 only Delator 1 only Delator 1 only Delator 6 only Delator 6 only Delator 6 only Delator 7 only Delator 7 only Delator 7 only Delator 8 only Delator 8 only Delator 8 only Delator 9 only Delator 9 only Delator 1 only Delator 9 only Delator 1 only De	Nonpriority Creditor's Name		
Oklahoma City OK 73146-0607 City Who incurred the debt? Check one. Debtor 1 and Debtor 2 only Debtor 2 only Debtor 3 and Debtor 2 only Debtor 4 and Debtor 2 only Debtor 5 and Debtor 5 only Debtor 5 and Debtor 5 only Debtor 5 only Debtor 6 only Debtor 1 and Debtor 9 only Debtor 1 and Debtor 9 only Debtor 1 and Debtor 9 only Debtor 1 only Debtor 2 only Debtor 3 only Debtor 2 only Debtor 2 only Debtor 2 only Debtor 3 only Debtor 2 only Debtor 4 only Debtor 2 only Debtor 4 only Debtor 4 only Debtor 5 only Debtor 1 only Debtor 1 only Debtor 1 only Debtor 2 only Debtor 3 only Debtor 4 only Debtor 4 only Debtor 4 only Debtor 5 only Debtor 5 only Debtor 5 only Debtor 6 only Debtor 6 only Debtor 6 only Debtor 7 only Debtor 7 only Debtor 1 only Debtor 2 only Debtor 2 only Debtor 3 only Debtor 4 only Debtor 4 only Debtor 5 only Debtor 5 only Debtor 6 only Debtor 8 only Debtor 6 only Debtor 8 only Debtor 9 only only Debtor 9 only Debtor			
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Oklahoma City OK 73146-0607 City City City City City City City City			
State	Oklahoma City OK 73146-0607	_ Disputed	
Debtor 1 only	City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Debtor 2 only		Student loans	
Debtor 1 and Debtor 2 only Debtor 3 and other similar debts Debtor 1 and Debtor 3 and other similar debts Debtor 3 and other similar debts Debtor 4 and Debtor 3 and other similar debts Debtor 5 and other similar debts Debtor 6 and other similar debts Debtor 6 and other similar debts Debtor 6 and other similar debts Debtor 1 and Debtor 2 only Debtor 1 and Debtor 3 and Debtor 8 and other similar debts Debtor 1 and Debtor 6 and Debtor 8 and other similar debts Debtor 1 and Debtor 8 and other similar debts Debtor 1 and Debtor 9 and 18 and other similar debts Debtor 1 and Debtor 9 and 18 and other similar debts Debtor 1 and Debtor 9 and 18 and other similar debts Debtor 1 and Debtor 9 and 18 and other similar debts Debtor 1 and Debtor 9 and 18 and other similar debts Debtor 1 and Debtor 1 and Debtor 9 and 18 and other similar debts Debtor 1 and Debtor 2 only Debtor 1 and Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 3 and Debtor 1 and Debtor 1 and Debtor 1 and Debtor 1 and Debtor 2 only Debtor 1 and Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only Debtor 2 only Debtor 1 and Debtor 2 only	L		
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Check if this claim is for a community debt is the claim subject to offset? Aspire Credit Card			
Aspire Credit Card Aspire Credit Card Aspire Credit Card When was the debt incurred? 04/2020 As of the date you file, the claim is: Check all that apply. Debtor 1 only Debtor 2 only Debtor 4 only Credit Card Nonprinty Creditor's Name Atti. Bankruptcy Atti. Bankruptcy Check one. Debtor 1 only Debtor 5 only Check one. Debtor 1 only Debtor 2 only Debtor 1 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 3 only Debtor 4 only Debtor 4 only Debtor 5 only Debtor 5 only Debtor 5 only Debtor 6 only Debtor 7 only Debtor 8 only Debtor 8 only Debtor 8 only Debtor 9 only Debto	Check if this claim is for a community debt		
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□ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? □ No			
☐ Check if this claim is for a community debt Is the claim subject to offset? ☑ № ☑ № ☐ No			
Is the claim subject to offset? ☑ №			
☑ No		Credit Card	
<u> </u>			
	<u> </u>		

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Debtor 1 Tony Edward Giddens Debtor 2 Terri Lynne Giddens	Case number (if known)	
Part 2: Your NONPRIORITY Unsecu	red Claims Continuation Page	
After listing any entries on this page, number them sequentially from the previous page.		Total claim
4.6		\$1,933.00
B&F Corp	Last 4 digits of account number 3 8 6 5	
Nonpriority Creditor's Name	When was the debt incurred? 11/10/2022	
2303 N Broadway Number Street	As of the date you file, the claim is: Check all that apply.	
	_ Contingent	
	Unliquidated	
Oklahoma City OK 73103	─ □ Disputed	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one. Debtor 1 only	Student loans	
Debtor 2 only	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
Debtor 1 and Debtor 2 only	Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	☑ Other. Specify	
Check if this claim is for a community debt	Signature Loan	
Is the claim subject to offset? ✓ No		
☑ No ☐ Yes		
4.7		\$2,000.00
B&F Corp	Last 4 digits of account number	
Nonpriority Creditor's Name 2303 N Broadway	When was the debt incurred? 11/2022	
Number Street	As of the date you file, the claim is: Check all that apply.	
	— ☐ Disputed	
Oklahoma City OK 73103		
City State ZIP Code Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce	
Debtor 2 only	that you did not report as priority claims	
Debtor 1 and Debtor 2 only At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts	
Check if this claim is for a community debt	✓ Other. Specify	
Is the claim subject to offset?	Signature Loan	
✓ No		
Yes		
4.8		00.040.00
	Loct 4 digits of account number C 7 0 7	\$2,919.00
Capital One Nonpriority Creditor's Name	Last 4 digits of account number 6 7 0 7	
Attn: Bnakruptcy	When was the debt incurred? 04/2021	
Number Street P.O. Box 30285	As of the date you file, the claim is: Check all that apply. ☐ Contingent	
	Unliquidated	
Salt Lake City UT 84130	Disputed	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	Student loans	
☐ Debtor 1 only ☐ Debtor 2 only	Obligations arising out of a separation agreement or divorce	
Debtor 2 only Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify	
Check if this claim is for a community debt	Credit Card	
Is the claim subject to offset?		
No Yes		
☐ Yes		

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Debtor 1 Tony Edward Giddens Debtor 2 Terri Lynne Giddens	Case number (if known)	
Part 2: Your NONPRIORITY Unsecui	red Claims Continuation Page	
After listing any entries on this page, number the previous page.	m sequentially from the	Total claim
4.9		\$1,503.00
Capital One	Last 4 digits of account number 3 9 7 8	
Nonpriority Creditor's Name Attn: Bnakruptcy	When was the debt incurred? 11/2019	
Number Street P.O. Box 30285	As of the date you file, the claim is: Check all that apply.	
F.O. BOX 30283	_	
Colt Lake City LIT 04420	Disputed	
Salt Lake City UT 84130 City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	Student loans	
Debtor 1 only Debtor 2 only	Obligations arising out of a separation agreement or divorce	
Debtor 1 and Debtor 2 only	that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	✓ Other. Specify	
Check if this claim is for a community debt	Credit Card	
Is the claim subject to offset? ✓ No ☐ Yes		
4.10		¢2.460.00
Cashworld	Last 4 digits of account number	\$2,460.00
Nonpriority Creditor's Name	When was the debt incurred?	
5730 NW 39th Street Number Street	As of the date you file, the claim is: Check all that apply.	
	_ Contingent	
	☐ Unliquidated ☐ Disputed	
Oklahoma City OK 73122		
City State ZIP Code Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce	
Debtor 2 only	that you did not report as priority claims	
Debtor 1 and Debtor 2 only At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
☐ Check if this claim is for a community debt	✓ Other. Specify Signature Loan	
Is the claim subject to offset?	0.3	
☑ No		
Yes		
4.11		\$1,020.00
CFNA/Credit First Natl Assoc	Last 4 digits of account number 7 7 5	
Nonpriority Creditor's Name Attn: Bankruptcy	When was the debt incurred? 10/2016	
Number Street PO Box 81315	As of the date you file, the claim is: Check all that apply.	
FO BOX 01313	_	
Cleveland OH 44181	Disputed	
Cleveland OH 44181 City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	Student loans	
Debtor 1 only Debtor 2 only	Obligations arising out of a separation agreement or divorce	
Debtor 1 and Debtor 2 only	that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	Other. Specify	
Check if this claim is for a community debt	Charge Account	
Is the claim subject to offset? ✓ No		
✓ No ☐ Yes		

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Debtor 1 Tony Edward Giddens Debtor 2 Terri Lynne Giddens	Case number (if known)	
Part 2: Your NONPRIORITY Unsecu	red Claims Continuation Page	
After listing any entries on this page, number them sequentially from the previous page.		Total claim
4.12		\$637.00
Comenity/MPRC	Last 4 digits of account number 0 8 6 8	
Nonpriority Creditor's Name	When was the debt incurred? 08/2018	
Attn: Bankruptcy Number Street	As of the date you file, the claim is: Check all that apply.	
PO Box 182125	_ Contingent	
	Unliquidated	
Columbus OH 43218	─ □ Disputed	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one. Debtor 1 only	☐ Student loans	
Debtor 2 only	Obligations arising out of a separation agreement or divorce	
Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify	
☐ Check if this claim is for a community debt	Charge Account	
Is the claim subject to offset?	v	
☑ No		
Yes		
4.13		\$602.00
Continental Finance Company	Last 4 digits of account number 3 9 7 0	
Nonpriority Creditor's Name	When was the debt incurred? 07/2021	
Attn: Bankruptcy Number Street	As of the date you file, the claim is: Check all that apply.	
PO Box 8099	_ ☐ Contingent	
	Unliquidated	
Newark DE 19714	Disputed	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	Student loans	
Debtor 1 only	Obligations arising out of a separation agreement or divorce	
Debtor 2 only Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
☐ Check if this claim is for a community debt	✓ Other. Specify Credit Card	
Is the claim subject to offset?	Credit Card	
No		
Yes		
4.14		¢4 474 00
	Last 4 digits of account number 2 4 7 4	\$1,171.00
Continental Finance Company Nonpriority Creditor's Name	Last 4 digits of account number 2 1 7 4	
Attn: Bankruptcy	When was the debt incurred? 04/2019	
Number Street PO Box 8099	As of the date you file, the claim is: Check all that apply.	
10 200 0000		
	─ ☐ Disputed	
Newark DE 19714 City State ZIP Code		
Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce	
Debtor 2 only	that you did not report as priority claims	
Debtor 1 and Debtor 2 only	Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	☑ Other. Specify	
☐ Check if this claim is for a community debt	Credit Card	
Is the claim subject to offset?		
☑ No □ Yes		
□ .~~		

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Debtor 1 Tony Edward Giddens Debtor 2 Terri Lynne Giddens	Case number (if known)	
Part 2: Your NONPRIORITY Unsecu	red Claims Continuation Page	
After listing any entries on this page, number the previous page.	m sequentially from the	Total claim
4.15		\$824.00
Credit One Bank	Last 4 digits of account number 6 7 9 8	
Nonpriority Creditor's Name	When was the debt incurred? 10/2018	
Attn: Bankruptcy Department Number Street	As of the date you file, the claim is: Check all that apply.	
PO Box 98873	_ Contingent	
	Unliquidated	
Las Vegas NV 89193	─	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	Student loans	
Debtor 1 only Debtor 2 only	Obligations arising out of a separation agreement or divorce	
Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify	
Check if this claim is for a community debt	Credit Card	
Is the claim subject to offset?		
☑ No		
Yes		
4.16		£704.00
	Look 4 digita of account number 0 7 C 0	\$791.00
Credit One Bank Nonpriority Creditor's Name	Last 4 digits of account number0 _ 7 _ 6 _ 0	
Attn: Bankruptcy Department	When was the debt incurred? 10/2019	
Number Street PO Box 98873	As of the date you file, the claim is: Check all that apply.	
1 O BOX 30070		
	— ☐ Disputed	
Las Vegas NV 89193 City State ZIP Code		
Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
☐ Debtor 1 only	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce	
Debtor 2 only	that you did not report as priority claims	
Debtor 1 and Debtor 2 only	Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	Other. Specify	
Check if this claim is for a community debt	Credit Card	
Is the claim subject to offset? ✓ No		
☑ No □ Yes		
4.17		\$148.38
Digestive Disease Specialists, Inc.	Last 4 digits of account number 7 1 7 3	
Nonpriority Creditor's Name PO Box 7316	When was the debt incurred? 05/14/2019	
Number Street	As of the date you file, the claim is: Check all that apply.	
	_ Contingent	
	Unliquidated	
Edmond OK 73083-7316	─	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	Student loans	
☐ Debtor 1 only ☐ Debtor 2 only	Obligations arising out of a separation agreement or divorce	
Debtor 2 only Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify	
Check if this claim is for a community debt	Medical Bill	
Is the claim subject to offset?	**	
☑ No		
☐ Yes		

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Debtor 1 Tony Edward Giddens Debtor 2 Terri Lynne Giddens	Case number (if known)	
Part 2: Your NONPRIORITY Unsecu	red Claims Continuation Page	
After listing any entries on this page, number the previous page.	m sequentially from the	Total claim
4.18		\$187.00
Enhanced Recovery Company	Last 4 digits of account number 4 1 2 0	<u>.</u>
Nonpriority Creditor's Name	When was the debt incurred? 12/2018	
Attn: Bankruptcy Number Street	As of the date you file, the claim is: Check all that apply.	
8014 Bayberry Road	_	
Jacksonville FL 32256	Disputed	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one. Debtor 1 only	Student loans	
Debtor 2 only	Obligations arising out of a separation agreement or divorce	
Debtor 1 and Debtor 2 only	that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	Other. Specify	
☐ Check if this claim is for a community debt	Collection Attorney	
Is the claim subject to offset?		
☑ No ☐ Yes		
4.19		****
	Lock A digita of account number 2 0 0 0	\$303.00
First Savings Bank Nonpriority Creditor's Name	Last 4 digits of account number3286	
Attn: Bankruptcy	When was the debt incurred? 07/2020	
Number Street	As of the date you file, the claim is: Check all that apply.	
P.O. Box 5019		
	☐ Disputed	
Sioux Falls SD 57117		
City State ZIP Code Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	Student loans	
Debtor 2 only	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
Debtor 1 and Debtor 2 only	Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	Other. Specify	
☐ Check if this claim is for a community debt	Credit Card	
Is the claim subject to offset?		
No Voc		
Yes		
4.20		\$1,241.00
Fortiva	Last 4 digits of account number 1 4 4 4	
Nonpriority Creditor's Name	When was the debt incurred? 02/2019	
Attn: Bankruptcy Number Street	As of the date you file, the claim is: Check all that apply.	
PO Box 105555	_ Contingent	
	Unliquidated	
Atlanta GA 30348	─ □ Disputed	
City State ZIP Code Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	Student loans	
Debtor 2 only	Obligations arising out of a separation agreement or divorce	
Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify	
Check if this claim is for a community debt	Credit Card	
Is the claim subject to offset?		
☑ No		
Yes		

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Debtor 1 Tony Edward Giddens Debtor 2 Terri Lynne Giddens	Case number (if known)	
Part 2: Your NONPRIORITY Unsecu	red Claims Continuation Page	
After listing any entries on this page, number the previous page.	m sequentially from the	Total claim
4.21		\$1,194.00
Fortiva	Last 4 digits of account number 7 1 0 3	
Nonpriority Creditor's Name Attn: Bankruptcy	When was the debt incurred? 08/2022	
Number Street	As of the date you file, the claim is: Check all that apply.	
PO Box 105555	Contingent Unliquidated	
	— ☐ Disputed	
Atlanta GA 30348 City State ZIP Code	- The AMONDRIORITY and a data	
Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim: ☐ Student loans	
Debtor 1 only	☐ Obligations arising out of a separation agreement or divorce	
Debtor 2 only Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
☐ Check if this claim is for a community debt	✓ Other. Specify Credit Card	
Is the claim subject to offset?	oroun ouru	
☑ No		
Yes		
4.22		\$438.00
LI Genesis FS Card	Last 4 digits of account number 5 9 2 8	Ψ+00.00
Nonpriority Creditor's Name	When was the debt incurred? 03/2021	
Attn: Bankruptcy Number Street	As of the date you file, the claim is: Check all that apply.	
PO Box 4477	_	
	Unliquidated	
Beaverton OR 97076	Disputed	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one. Debtor 1 only	Student loans	
Debtor 2 only	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
Debtor 1 and Debtor 2 only	Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	Other. Specify	
Check if this claim is for a community debt	Credit Card	
Is the claim subject to offset? ☑ No		
Yes		
4.23		\$102.00
Genesis FS Card Services Nonpriority Creditor's Name	Last 4 digits of account number 3 5 4 7	
Attn: Bankruptcy	When was the debt incurred? 02/2019	
Number Street PO Box 4477	 As of the date you file, the claim is: Check all that apply. □ Contingent 	
	Unliquidated	
Beaverton OR 97076	Disputed	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	Student loans	
☐ Debtor 1 only ☐ Debtor 2 only	Obligations arising out of a separation agreement or divorce	
Debtor 2 only Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify	
☐ Check if this claim is for a community debt	Credit Card	
Is the claim subject to offset?		
No Vas		
Yes		

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Debtor 1 Tony Edward Giddens Debtor 2 Terri Lynne Giddens	Case number (if known)	
Part 2: Your NONPRIORITY Unsecur	red Claims Continuation Page	
After listing any entries on this page, number the previous page.	m sequentially from the	Total claim
4.24		\$291.00
Genesis FS Card Services	Last 4 digits of account number 2 1 6 3	
Nonpriority Creditor's Name Attn: Bankruptcy	When was the debt incurred? 05/2020	
Number Street	As of the date you file, the claim is: Check all that apply.	
PO Box 4477	_	
	Disputed	
Beaverton OR 97076 City State ZIP Code	Type of NONDBIODITY upgequired eleims	
Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim: Student loans	
Debtor 1 only	Obligations arising out of a separation agreement or divorce	
✓ Debtor 2 only✓ Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify	
Check if this claim is for a community debt	Credit Card	
Is the claim subject to offset?		
No Vos		
Yes		
4.25		\$224.18
Integris	Last 4 digits of account number 3 9 3 8	
Nonpriority Creditor's Name PO Box 258877	When was the debt incurred? 06/30/2020	
Number Street	As of the date you file, the claim is: Check all that apply.	
	_	
	□ Disputed	
Oklahoma City OK 73125 City State ZIP Code	Type of NONDRIORITY unacquired eleims	
Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim: Student loans	
Debtor 1 only	Obligations arising out of a separation agreement or divorce	
✓ Debtor 2 only✓ Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify	
☐ Check if this claim is for a community debt	Medical	
Is the claim subject to offset?		
☑ No □ Yes		
4.26		\$1,694.32
Integris	_ Last 4 digits of account number _ <u>5</u> _ <u>3</u> _ <u>6</u>	
Nonpriority Creditor's Name PO Box 258877	When was the debt incurred? 09/23/2019	
Number Street	As of the date you file, the claim is: Check all that apply.	
	_	
Oklahama City OV 70405	Disputed	
Oklahoma City OK 73125 City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	Student loans	
Debtor 1 only Debtor 2 only	Obligations arising out of a separation agreement or divorce	
Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify	
☐ Check if this claim is for a community debt	Medical Bill	
Is the claim subject to offset?		
☑ No ☐ Yes		

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Debtor 1 Tony Edward Giddens Debtor 2 Terri Lynne Giddens	Case number (if known)	
Part 2: Your NONPRIORITY Unsecu	red Claims Continuation Page	
After listing any entries on this page, number the previous page.	m sequentially from the	Total claim
4.27		\$3,150.17
Integris	Last 4 digits of account number 8 0 9 4	
Nonpriority Creditor's Name PO Box 258877	When was the debt incurred? 07/08/2019	
Number Street	As of the date you file, the claim is: Check all that apply.	
	_ Contingent	
	☐ Unliquidated ☐ ☐ Disputed	
Oklahoma City OK 73125	— — — — — — — — — — — — — — — — — — —	
City State ZIP Code Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce	
Debtor 2 only	that you did not report as priority claims	
Debtor 1 and Debtor 2 only At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
	✓ Other. Specify	
Check if this claim is for a community debt	Medical Bill	
Is the claim subject to offset? ✓ No ☐ Yes		
4.20		
4.28		\$575.00
Kohls/Capital One Nonpriority Creditor's Name	Last 4 digits of account number0059	
Attn: Credit Administrator	When was the debt incurred? 06/2016	
Number Street PO Box 3043	As of the date you file, the claim is: Check all that apply.	
Milwayles MI 50004	Disputed	
Milwaukee WI 53201 City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	Student loans	
Debtor 1 only	Obligations arising out of a separation agreement or divorce	
Debtor 2 only Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify	
Check if this claim is for a community debt	Charge Account	
Is the claim subject to offset?	• •	
✓ No ☐ Yes		
4.29		\$567.00
Kohls/Capital One Nonpriority Creditor's Name	Last 4 digits of account number0684	
Attn: Credit Administrator	When was the debt incurred? 04/2016	
Number Street PO Box 3043	As of the date you file, the claim is: Check all that apply. ☐ Contingent	
	☐ Unliquidated	
Milwaukee WI 53201	Disputed	
Milwaukee WI 53201 City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	Student loans	
☐ Debtor 1 only ☐ Debtor 2 only	Obligations arising out of a separation agreement or divorce	
Debtor 2 only Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify	
Check if this claim is for a community debt	Charge Account	
Is the claim subject to offset?	•	
No Voc		
Yes		

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Debtor 1 Tony Edward Giddens Debtor 2 Terri Lynne Giddens	Case number (if known)	
Part 2: Your NONPRIORITY Unsecur	red Claims Continuation Page	
After listing any entries on this page, number the previous page.	m sequentially from the	Total claim
4.30		\$481.00
Merrick Bank Corp	Last 4 digits of account number 1 6 8 5	
Nonpriority Creditor's Name Po Box 9201	When was the debt incurred? 05/2021	
Number Street	As of the date you file, the claim is: Check all that apply.	
	_	
	□ Disputed	
Old Bethpage NY 11804 City State ZIP Code	- (NONESIONIE)	
Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim: Student loans	
Debtor 1 only	Obligations arising out of a separation agreement or divorce	
Debtor 2 only	that you did not report as priority claims	
Debtor 1 and Debtor 2 only At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
☐ Check if this claim is for a community debt	✓ Other. Specify Credit Card	
Is the claim subject to offset?	oreant oard	
✓ No		
Yes		
4.31		£40 C04 00
Navient Solutions Inc	Last 4 digits of account number 0 6 0 8	\$12,624.00
Nonpriority Creditor's Name	Last 4 digits of account number 0 6 0 8 When was the debt incurred? 06/2016	
Attn: Bankruptcy Number Street	As of the date you file, the claim is: Check all that apply.	
P.O. Box 9500	Contingent	
	Unliquidated	
Wilkes-Barre PA 18773	¯	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	Student loans	
Debtor 1 only Debtor 2 only	Obligations arising out of a separation agreement or divorce	
Debtor 1 and Debtor 2 only	that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	Other. Specify	
☐ Check if this claim is for a community debt		
Is the claim subject to offset?		
☑ No □ Yes		
4.32		\$12,094.00
Navient Solutions Inc	Last 4 digits of account number 1 2 1 3	
Nonpriority Creditor's Name Attn: Bankruptcy	When was the debt incurred? 12/2016	
Number Street	As of the date you file, the claim is: Check all that apply.	
P.O. Box 9500	_	
	□ Disputed	
Wilkes-Barre PA 18773 City State ZIP Code		
City State ZIP Code Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	✓ Student loans✓ Obligations arising out of a separation agreement or divorce	
Debtor 2 only	that you did not report as priority claims	
Debtor 1 and Debtor 2 only At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
Check if this claim is for a community debt	Other. Specify	
Is the claim subject to offset?		
✓ No		
Yes		

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Debtor 1 Debtor 2 Tony Edward Giddens Terri Lynne Giddens Case number (if known) Your NONPRIORITY Unsecured Claims Continuation Page		
4.33		\$9,189.00
Navient Solutions Inc	Last 4 digits of account number 1 2 0 1	
Nonpriority Creditor's Name Attn: Bankruptcy	When was the debt incurred? 11/2020	
Number Street	As of the date you file, the claim is: Check all that apply.	
P.O. Box 9500	_ Contingent	
	☐ Unliquidated ☐ Disputed	
Wilkes-Barre PA 18773		
City State ZIP Code Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	✓ Student loans✓ Obligations arising out of a separation agreement or divorce	
Debtor 2 only	that you did not report as priority claims	
Debtor 1 and Debtor 2 only At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
Check if this claim is for a community debt	Other. Specify	
Is the claim subject to offset?		
✓ No Yes		
4.34		¢42 244 00
Navient Solutions Inc	Last 4 digits of account number 0 9 2 0	\$42,214.00
Nonpriority Creditor's Name	Last 4 digits of account number0920	
Attn: Bankruptcy Number Street	As of the date you file, the claim is: Check all that apply.	
P.O. Box 9500	_ ☐ Contingent	
	Unliquidated	
Wilkes-Barre PA 18773	Disputed	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one. Debtor 1 only	☑ Student loans	
Debtor 2 only	Obligations arising out of a separation agreement or divorce	
Debtor 1 and Debtor 2 only	that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	Other. Specify	
☐ Check if this claim is for a community debt		
Is the claim subject to offset?		
☑ No □ Yes		
4.35		\$163.72
Northwest Anesthesia PC	Last 4 digits of account number6419_	
Nonpriority Creditor's Name PO Box 840850	When was the debt incurred? 07/30/2019	
Number Street	As of the date you file, the claim is: Check all that apply.	
	_	
	□ Disputed	
Dallas TX 75284-0850 City State ZIP Code		
Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce	
Debtor 2 only	that you did not report as priority claims	
Debtor 1 and Debtor 2 only At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
Check if this claim is for a community debt	✓ Other. Specify Medical Bill	
Is the claim subject to offset?	medicai Dili	
No		
Yes		

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Debtor 1 Tony Edward Giddens Debtor 2 Terri Lynne Giddens	Case number (if known)	
Part 2: Your NONPRIORITY Unsecu	red Claims Continuation Page	
After listing any entries on this page, number the previous page.	m sequentially from the	Total claim
A.36 Oklahoma City Gynecology & Obstetrics Nonpriority Creditor's Name PO Box 14000 Number Street	Last 4 digits of account number 0 3 6 2 When was the debt incurred? 05/14/2020 As of the date you file, the claim is: Check all that apply. Contingent Unliquidated	\$130.26
Belfast ME 04915-4033 City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes	Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Medical Bill	
A.37 OneMain Financial Nonpriority Creditor's Name Attn: Bankruptcy Number Street PO Box 3251 Evansville IN 47731 City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes	Last 4 digits of account number 9 1 8 3 When was the debt incurred? 06/01/2021 As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Unsecured	\$7,540.00
4.38 Plain Green Loans Nonpriority Creditor's Name PO Box 270 Number Street Box Elder, MT 595.21 City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only	Last 4 digits of account number 5 1 5 2 When was the debt incurred? 11/02/2022 As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims	\$2,918.52
Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes	 □ Debts to pension or profit-sharing plans, and other similar debts ☑ Other. Specify Personal Loan 	

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Debtor 1 Tony Edward Giddens Debtor 2 Terri Lynne Giddens	Case number (if known)	
Part 2: Your NONPRIORITY Unsecu	red Claims Continuation Page	
After listing any entries on this page, number the previous page.	m sequentially from the	Total claim
4.39		\$87.89
Radiology Associates LLC	Last 4 digits of account number 4 0 8 8	
Nonpriority Creditor's Name	When was the debt incurred? 05/06/2020	
Department 960591 Number Street	As of the date you file, the claim is: Check all that apply.	
	_ Contingent	
	Unliquidated	
Oklahoma City OK 73196-0591	─	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	Student loans	
☐ Debtor 1 only ☐ Debtor 2 only	Obligations arising out of a separation agreement or divorce	
Debtor 2 only Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify	
Check if this claim is for a community debt	Medical Bill	
Is the claim subject to offset?	modical Bill	
⋈ No		
Yes		
4.40		
4.40		\$112.18
Radiology Associates, LLC	_ Last 4 digits of account number 7 3 6 1	
Nonpriority Creditor's Name 3330 NW 56th Street Suite 206	When was the debt incurred? 7/23/2019	
Number Street	As of the date you file, the claim is: Check all that apply.	
	_ Contingent	
	☐ Unliquidated ☐ ☐ Disputed	
Oklahoma City OK 73112-4426	Disputed	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one. Debtor 1 only	Student loans	
Debtor 2 only	Obligations arising out of a separation agreement or divorce	
Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify	
Check if this claim is for a community debt	Medical Bill	
Is the claim subject to offset?		
☑ No		
☐ Yes		
4.41		¢4 050 00
	Last 4 digits of account number 9 7 2 0	\$1,950.00
Security Finance Nonpriority Creditor's Name		
Attn: Centralized Bankruptcy	When was the debt incurred? 10/2022	
Number Street PO Box 1893	As of the date you file, the claim is: Check all that apply.	
10 200 1000		
	— ☐ Disputed	
Spartanburg SC 29304		
City State ZIP Code Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	Student loans Obligations arising out of a separation agreement or divorce	
Debtor 2 only	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
Debtor 1 and Debtor 2 only	Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	✓ Other. Specify	
☐ Check if this claim is for a community debt	Unsecured	
Is the claim subject to offset?		
No No		
Yes		

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Debtor 1 Tony Edward Giddens Debtor 2 Terri Lynne Giddens	Case number (if known)	
Part 2: Your NONPRIORITY Unsecu	red Claims Continuation Page	
After listing any entries on this page, number the previous page.	m sequentially from the	Total claim
4.42		\$1,950.00
Security Finance	Last 4 digits of account number 1 2 0 8	<u> </u>
Nonpriority Creditor's Name	When was the debt incurred? 10/01/2022	
Attn: Centralized Bankruptcy Number Street	As of the date you file, the claim is: Check all that apply.	
PO Box 1893	_ Contingent	
	Unliquidated	
Spartanburg SC 29304	─ □ Disputed	
City State ZIP Code Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	Student loans	
Debtor 2 only	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
Debtor 1 and Debtor 2 only	Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	☑ Other. Specify	
Check if this claim is for a community debt	Unsecured	
Is the claim subject to offset? ✓ No		
☑ No ☐ Yes		
4.43		\$348.95
Surgical Partners of Oklahoma	Last 4 digits of account number2807_	
Nonpriority Creditor's Name 1808 Commons Cir Suite A	When was the debt incurred? 07/27/2018	
Number Street	As of the date you file, the claim is: Check all that apply.	
	Contingent Unliquidated	
	□ Disputed	
Yukon OK 73099-9518		
City State ZIP Code Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce	
Debtor 2 only	that you did not report as priority claims	
Debtor 1 and Debtor 2 only At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts	
Check if this claim is for a community debt	✓ Other. Specify	
Is the claim subject to offset?	Medical Bill	
No		
Yes		
4.44		**
	Lock A divide of account number . T. A. A. O.	\$1,464.00
Synchrony Bank/Walmart Nonpriority Creditor's Name	Last 4 digits of account number 7 1 4 6	
Attn Bankruptcy	When was the debt incurred? 11/2016	
Number Street PO Box 31293	As of the date you file, the claim is: Check all that apply.	
Solt Lake City LIT 94424	Disputed	
Salt Lake City UT 84131 City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	Student loans	
Debtor 1 only	Obligations arising out of a separation agreement or divorce	
Debtor 2 only Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
Check if this claim is for a community debt	✓ Other. Specify Credit Card	
Is the claim subject to offset?		
☑ No		
☐ Yes		

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After flisting any entries on this page, number them sequentially from the previous page. After flisting any entries on this page, number them sequentially from the previous page. Section	Debtor 1 Tony Edward Giddens Debtor 2 Terri Lynne Giddens	Case number (if known)	
Addition	Part 2: Your NONPRIORITY Unsecu	red Claims Continuation Page	
Section Sect		em sequentially from the	Total claim
Synchrony/PayPal Crodit Name	4.45		\$661.00
Aftin: Bankruptcy Number Strest PO Box 965060 Common	Synchrony/PayPal Credit	Last 4 digits of account number 8 1 9 6	
As of the date you flie, the claim is: Check all that apply.		When was the debt incurred? 09/2016	
Uniquidated Disputed Disput		As of the date you file, the claim is: Check all that apply.	
Disputed Disputed	PO Box 965060	—	
Orlando FL 32886 City Type of NONPRIORITY unsecured claim: Type of N			
Student loans Student loan			
Debtor 1 only	•	Type of NONPRIORITY unsecured claim:	
Debtor 2 only			
Debts to pension or profit-sharing plans, and other similar debts	L		
All Least one of the debtors and another Check if this claim is for a community debt is the claim subject to offset? A47	Debtor 1 and Debtor 2 only		
is the claim subject to offset? No Yes			
A46 Syneprise Consulting Services, Inc Last 4 digits of account number 1 0 5 2 When was the debt incurred? 01/2020 Minimum Street		Credit Card	
Synepriority Credition's Name Attn: Bankruptcy Mission KS 66202 City State ZiP Code			
Synerprise Consulting Services, Inc Last 4 digits of account number 1 0 5 2			
Synerprise Consulting Services, Inc Nonpriority Creditor's Name Attn: Bankruptcy Number Street 5651 Broadmoor Mission KS 66202 City State ZiP Code Who incurred the debt? Check one. Debtor 1 and Debtor 2 only Check if this claim is for a community debt is the claim subject to offset? Mismington DE 19850-5270 City State ZiP Code Whon incurred the debt? Check one. Debtor 1 only Check if this claim is for a community debt is the claim subject to offset? When was the debt incurred? 01/2020 As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debtor 1 and Debtor 2 only When was the debt incurred? When was the debt incurred? Type of NONPRIORITY unsecured claim: When was the debt incurred? Type of NONPRIORITY unsecured claim: When was the debt incurred? Type of NONPRIORITY unsecured claim: Struct Type of NONPRIORITY unsecured claim: When was the debt incurred? Type of NONPRIORITY unsecured claim: Type of NONPRIOR			
Mission KS 66202 Check one. Debtor 2 only Debtor 1 and Debtor 2 offset Street Collection Attorney Collection Attor	4.46		\$164.00
Attribute Sheet Sheet She		Last 4 digits of account number 1 0 5 2	
Number Street Sefot Broadmoor Contingent Contin		When was the debt incurred? 01/2020	
Mission KS 66202 Disputed Type of NONPRIORITY unsecured claim: Type of NonPriority Claims Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only Debtor 2 only Debtor 1 and Debtor 3 only Debtor 2 only Debtor 3 only Debtor 4 only Debtor 4 only Debtor 4 only Debtor 5 only Debtor 6 only Debtor 6 only Debtor 6 only Debtor 6 only Debtor 8 only Debtor 9 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 3 only Debtor 4 only Debtor 5 only Debtor 6 only Debtor 6 only Debtor 6 only Debtor 6 only Debtor 7 only Debtor 6 only Debtor 7 only D		As of the date you file, the claim is: Check all that apply.	
Disputed Disputed	5651 Broadmoor		
Mission KS 66202 City State ZIP Code Who incurred the debt? Check one. □ Debtor 1 only □ Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? Who mass the debt incurred? O7/11/2019 As of the date you file, the claim is: Check all that apply. Contingent □ Uniquidated □ Disputed Wilmington DE 19850-5270 City State ZIP Code Who incurred the debt? Check one. □ Debtor 1 only Debtor 2 only □ All east one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? Who was the debt incurred? O7/11/2019 As of the date you file, the claim is: Check all that apply. □ Contingent Uniquidated □ Disputed Type of NONPRIORITY unsecured claim: □ Check if this claim is for a community debt Is the claim subject to offset? □ Check if this claim is for a community debt Is the claim subject to offset? □ No			
Who incurred the debt? Check one. □ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ Check if this claim is for a community debt is the claim subject to offset? □ No □ Yes 4.47 □ Nonpriority Creditor's Name PO Box 15270 Number Street □ Check one. □ Debtor 1 only □ Debtor 1 only □ Debtor 2 only □ Debtor 1 only □ Debtor 1 only Debtor 2 only □ Debtor 1 only □ Check if this claim is for a community debt is the claim subject to offset? □ Nonpriority Creditor's Name Viniquidated □ Disputed □ Debtor 1 only □ Debtor 1 only □ Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt is the claim subject to offset? □ No □ No □ Debts to pension or profit-sharing plans, and other similar debts □ Debts to pension or profit-sharing plans, and other similar debts □ Debts to pension or profit-sharing plans, and other similar debts □ Debts to pension or profit-sharing plans, and other similar debts □ Debts to pension or profit-sharing plans, and other similar debts □ Debts to pension or profit-sharing plans, and other similar debts □ Debts to pension or profit-sharing plans, and other similar debts □ Debts to pension or profit-sharing plans, and other similar debts □ Debts to pension or profit-sharing plans, and other similar debts □ Debts to pension or profit-sharing plans, and other similar debts □ Debts to pension or profit-sharing plans, and other similar debts □ Debts to pension or profit-sharing plans, and other similar debts □ Debts to pension or profit-sharing plans, and other similar debts □ Debts to pension or profit-sharing plans, and other similar debts □ Debts to pension or profit-sharing plans, and other similar debts □ Debts to pension or profit-sharing plans, and other similar debts □ Debts to pension or profit-sharing plans, and other similar debts □ Debts to pension or profit-sharing plans, and other similar debts □ Debts to pension or profit-sharing plans, and other similar debts □ Debts to pension or profit-sharing plans, and other similar debts	Mission KS 66202	Disputed	
Debtor 1 only Debtor 2 only Debtor 2 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Debtor 1 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 only Debtor 2 only Debtor 2 only Debtor 3 one of the debtors and another Debtor 4 one of the debtors and another Debtor 5 one of the debtors and another Debtor 6 one of the debtors and another		Type of NONPRIORITY unsecured claim:	
□ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? □ No □ Yes □ Ves □ Nonpriority Creditor's Name PO Box 15270 □ Number Street □ Street □ State □ IP Code Who incurred the debt? Check one. □ Debtor 1 only □ Debtor 1 only □ Debtor 1 and Debtor 2 only □ Debtor 1 and Debtor 2 only □ Debtor 1 and Debtor 2 only □ Debtor 1 find potential is or a community debt Is the claim subject to offset? □ No □ No □ No □ Ves □ Ver State □ Ver Code □ Unliquidated □ Disputed □ Disputed □ Unliquidated □ Disputed □ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? □ No			
□ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? □ No □ Yes □ No □ Yes □ Ves □ Ves □ Ves □ Nopriority Creditor's Name PO Box 15270 Number Street □ Street □ State ZIP Code Who incurred the debt? Check one. □ Debtor 1 only □ Debtor 1 and Debtor 2 only □ Debtor 1 and Debtor 2 only □ Debtor 1 and Debtor 2 only □ Debtor 1 find polyone and another □ Check if this claim is for a community debt Is the claim subject to offset? □ No	L		
At least one of the debtors and another Check if this claim is for a community debt Collection Attorney Collection Attorney			
Collection Attorney Is the claim subject to offset? No No Yes 4.47 Transworld Systems Inc Nonpriority Creditor's Name PO Box 15270 Number Street When was the debt incurred? 07/11/2019 As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt is the claim subject to offset? No No No Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify	At least one of the debtors and another		
No	☐ Check if this claim is for a community debt	Collection Attorney	
Transworld Systems Inc Last 4 digits of account number 5 0 4 2 Nonpriority Creditor's Name PO Box 15270 Number Street When was the debt incurred? 07/11/2019 As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts 1 and Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only Check if this claim is for a community debt Is the claim subject to offset? No No No Last 4 digits of account number 5 0 4 2 When was the debt incurred? 07/11/2019 As of the date you file, the claim is: Check all that apply. Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify	•		
Transworld Systems Inc Nonpriority Creditor's Name PO Box 15270 Number Street When was the debt incurred? 07/11/2019 As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No No Last 4 digits of account number 5 0 4 2 O7/11/2019 As of the date you file, the claim is: Check all that apply. Check all that apply. Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify			
Transworld Systems Inc Nonpriority Creditor's Name PO Box 15270 Number Street When was the debt incurred? 07/11/2019 As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? I Last 4 digits of account number 5 0 4 2 When was the debt incurred? 07/11/2019 As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify			
Nonpriority Creditor's Name PO Box 15270 Number Street Wilmington DE 19850-5270 City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? When was the debt incurred? 07/11/2019 As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify	4.47		\$70.98
Number Street Street As of the date you file, the claim is: Check all that apply.	Transworld Systems Inc	Last 4 digits of account number 5 0 4 2	
As of the date you file, the claim is: Check all that apply. Contingent	'_ ' _ ' '	When was the debt incurred? 07/11/2019	
Wilmington DE 19850-5270 City State ZIP Code Who incurred the debt? Check one. □ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? □ No □ Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts □ Other. Specify		As of the date you file, the claim is: Check all that apply.	
Wilmington DE 19850-5270 City State ZIP Code Who incurred the debt? Check one. □ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? □ No Disputed Type of NONPRIORITY unsecured claim: Student loans ○ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ○ Debts to pension or profit-sharing plans, and other similar debts ○ Other. Specify			
Wilmington City State ZIP Code Who incurred the debt? Check one. □ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? □ No			
Who incurred the debt? Check one. □ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? □ No			
□ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? □ No	•	Type of NONPRIORITY unsecured claim:	
Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No No Congations arising out of a separation agreement of divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify			
Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No	L		
At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No	Debtor 1 and Debtor 2 only	- Dabita to according an anality about an along and other circles dabita	
Is the claim subject to offset? ☑ No	At least one of the debtors and another		
☑ No	☐ Check if this claim is for a community debt	_	

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Debtor 1 Debtor 2	Tony Edward Giddens Terri Lynne Giddens	Case number (if known)	
Part 2:	Your NONPRIORITY Unsecu	red Claims Continuation Page	
After listing previous pa	g any entries on this page, number the age.	m sequentially from the	Total claim \$2,395.00
Nonpriority Cr Po Box 64	ance Corporat reditor's Name 129 Street	Last 4 digits of account number 7 2 0 1 When was the debt incurred? 07/28/2022 As of the date you file, the claim is: Check all that apply. □ Contingent □ Unliquidated	
Debtor Debtor Debtor At least Check	State ZIP Code red the debt? Check one. 1 only	 □ Disputed Type of NONPRIORITY unsecured claim: □ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts ☑ Other. Specify Signature Loan 	

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	Tony Edward Giddens Terri Lynne Giddens	Case number (if known)
Part 3:	List Others to Be Notified About a Debt That You Alrea	dy Listed

Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional parties to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

AMR, LLC			On which entry in Part 1 or Part 2 did you list the original creditor?
Name			Line 4.42 of (Cheek and): Dept 1: Creditors with Priority Uncongred Claims
PO Box 60607 Number Street			Line 4.43 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
			_
Oklahoma City	OK	73146-0607	— Last 4 digits of account number 4 2 5 3
City	State	ZIP Code	_
AMR, LLC			On which entry in Part 1 or Part 2 did you list the original creditor?
Name PO Box 60607			Line 4.40 of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number Street			
			── Part 2: Creditors with Nonpriority Unsecured Claims
Oklahama City	OK	72446 0607	— Last 4 digits of account number <u>4 2 5 3</u>
Oklahoma City City	OK State	73146-0607 ZIP Code	_
CAC Financial Corp			On which entry in Part 1 or Part 2 did you list the original creditor?
Name			
2601 NW Expressway S Number Street	suite 10	0E	Line 4.40 of (Check one): Part 1: Creditors with Priority Unsecured Claims
			✓ Part 2: Creditors with Nonpriority Unsecured Claims
			— Last 4 digits of account number 9 4 5 1
Oklahoma City	OK	73112-7238	<u> </u>
City	State	ZIP Code	
CAC Financial Corp			On which entry in Part 1 or Part 2 did you list the original creditor?
2601 NW Expressway S	Suite 10	0F	Line 4.25 of <i>(Check one):</i> Part 1: Creditors with Priority Unsecured Claims
Number Street	<u> </u>	<u></u>	_
			── Part 2: Creditors with Nonpriority Unsecured Claims
Oldahama O'tu	01/	70440 7000	— Last 4 digits of account number 9 4 5 1
Oklahoma City City	OK State	73112-7238 ZIP Code	_
Oity	Otato	Zii Oodc	
CBSA Collections			On which entry in Part 1 or Part 2 did you list the original creditor?
PO Box 1929			Line 4.17 of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number Street			
			Part 2: Creditors with Nonpriority Unsecured Claims
	011		— Last 4 digits of account number <u>1 9 3 9</u>
Stillwater City	OK State	74076-1929 ZIP Code	<u> </u>
ONY	Oldio	2.1 Oodo	
Morgan & Associates Name			On which entry in Part 1 or Part 2 did you list the original creditor?
2601 N.W. Expressway			Line 4.27 of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number Street			— — — — ☐ Part 2: Creditors with Nonpriority Unsecured Claims
Suite 205 East			
Oklahoma City	ОК	73112	— Last 4 digits of account number <u>4 1 5 1</u>
City	State	ZIP Code	_

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Debtor 1 Debtor 2	Tony Edward G Terri Lynne Gid							_ c	Case	number (if known)
Part 3:	List Others t	о Ве	Notified Abou	ut a De	bt Th	at `	You Alı	ready	Lis	sted Continuation Page
	& Associates			_ On v	vhich e	entry	in Part	1 or Pa	art 2	2 did you list the original creditor?
Name 18 Campu Number	us Blvd., Suite 10 Street	0		Line	4.38	_of	(Check	one):		Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Newtown City		PA tate	19073 ZIP Code	— Last —	4 digit	ts of	accoun	t numb	er	
Name	a Tax Commissio al Bankruptcy Street 69056	n		On w		•				Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Oklahoma City)K tate	73126-0956 ZIP Code	— Last —	4 digit	ts of	accoun	t numb	oer	

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Tony Edward Giddens Terri Lynne Giddens	Case number (if known)
TOTTI Eyillio Oladollo	Case number (if known)

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

				Total claim
Total claims from Part 1	6a.	Domestic support obligations	6a.	\$0.00
	6b.	Taxes and certain other debts you owe the government	6b.	\$5,000.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d. 🖣	\$3,000.00
	6e.	Total. Add lines 6a through 6d.	6d.	\$8,000.00
				Total claim
Total claims from Part 2	6f.	Student loans	6f.	\$76,121.00
	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$70.98
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i. 🖣	¥48,309.05
	6j.	Total. Add lines 6f through 6i.	6j.	\$124,501.03

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Fill in this i	nformation to i	dentify your case	:		
Debtor 1	Tony	Edward	Giddens		
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse, if filing	Terri	Lynne Middle Name	Giddens Last Name		
United States I Case number (if known)	Bankruptcy Court fo	or the: WESTERN DIS	STRICT OF OKLAHO	OMA_	Check if this is an amended filing
Official For	m 106G				
Schedule	G: Executory	y Contracts an	d Unexpired Lo	eases	
correct informa	tion. If more spac	e is needed, copy the		gether, both are equally re out, number the entries, a wn).	

1. Do you have any executory contracts or unexpired leases?

- No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.

 Yes. Fill in all of the information below even if the contracts or leases are listed on *Schedule A/B: Property* (Official Form 106A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease
 is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of
 executory contracts and unexpired leases.

Person or company with whom you have the contract or lease

State what the contract or lease is for

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Fill in this i	nformation to i	dentify your case	:	
Debtor 1	Tony	Edward	Giddens	
	First Name	Middle Name	Last Name	
Debtor 2	Terri	Lynne	Giddens	
(Spouse, if filir	ng) First Name	Middle Name	Last Name	
United States	Bankruptcy Court fo	or the: WESTERN DIS	STRICT OF OKLAHO	MA_
Case number				
(if known)				
Official For	m 106H			
		obtoro		
Schedule	H: Your Cod	eptors		
	ve any codebtors?		ame and case number	
include Ariz	zona, California, Ida so to line 3.	aho, Louisiana, Nevada	nity property state or te , New Mexico, Puerto Rio quivalent live with you at	co, Texas
3. In Column person she creditor or	own in line 2 agair Schedule D (Offi	as a codebtor only if	ude your spouse as a o that person is a guarar dule E/F (Official Form at Column 2.	ntor or co

Column 1: Your codebtor

Column 2: The creditor to whom you owe the debt

Check all schedules that apply:

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Fill in this inforr	mation to identify				
Debtor 1	Tony First Name	Edward Middle Name	Giddens Last Name	- Che	eck if this is:
Debtor 2 (Spouse, if filing)	Terri First Name	Lynne Middle Name	Giddens Last Name	- 🗖	An amended filing
United States Bankruptcy Court for the:		WESTERN DISTRICT OF OKLAHOMA		_	A supplement showing postpetition chapter 13 income as of the following date:
Case number (if known)					MM / DD / YYYY

Official Form 106I

Schedule I: Your Income

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Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Р	art 1: Describe En	nployment						
Fill in your employment information.			Debt	or 1			Debtor 2 o	r non-filing spouse
If you have more than one job, attach a separate page with information about				✓ Employed☐ Not employed		✓ Employed☐ Not employed		
	additional employers.	Occupation	Driver Schwartz Ready Mix, Inc.		Benefits			
	Include part-time, seasons or self-employed work.	al, Employer's name				Oklahoma Teachers Retirement System		
	Occupation may include student or homemaker, if			1400 S. Holly Avenue Number Street		PO Box 53524 Number Street Oklahoma City, OK 73152-3524		
	applies.		Yukon, oK 73099					
			weekly-(405) 354-8824		monthly (405) 521-2387			
			City		State	Zip Code	City	State Zip Code
How		How long employed to	oyed there? 2 years		10 years			
						_		

Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

			For Debtor 1	For Debtor 2 or non-filing spouse
2.	List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.	2.	\$5,569.76	\$5,662.85
3.	Estimate and list monthly overtime pay.	3. 4	\$0.00	\$0.00
4.	Calculate gross income. Add line 2 + line 3.	4.	\$5,569.76	\$5,662.85

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Debtor 1

Tony Edward Giddens

Debtor 2 Terri Lynne Giddens Case number (if known) For Debtor 1 For Debtor 2 or non-filing spouse Copy line 4 here \$5,569.76 \$5,662.85 List all payroll deductions: \$753.42 5a. Tax, Medicare, and Social Security deductions 5a. \$1,013.86 5b. Mandatory contributions for retirement plans 5b \$0.00 \$0.00 \$167.99 \$0.00 5c. Voluntary contributions for retirement plans 5c. \$0.00 \$0.00 5d. Required repayments of retirement fund loans 5d. \$0.00 \$1,166.05 5e 5e. Insurance \$0.00 \$0.00 5f. 5f. Domestic support obligations \$0.00 \$0.00 5g. Union dues 5g. 5h Other deductions \$21.<u>45</u> \$15.03 5h.+ Specify: Life Insurance / See continuation sheet Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e + 5f + 6 \$1,203.30 \$1,934.50 5a + 5hCalculate total monthly take-home pay. 7. Subtract line 6 from line 4. \$4,366.46 \$3,728.35 List all other income regularly received: 8a. Net income from rental property and from operating a 8a \$0.00 \$0.00 business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. 8b. Interest and dividends 8b. \$0.00 \$0.00 8c. Family support payments that you, a non-filing spouse, or a \$0.00 \$0.00 8c. dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8d. Unemployment compensation 8d. \$0.00 \$0.00 8e. Social Security 8e. \$0.00 \$0.00 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) or any noncash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: 8f. \$0.00 \$0.00 8g. Pension or retirement income 8g. \$0.00 \$0.00 8h. Other monthly income. 8h.+ Specify: \$0.00 \$0.00 Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f + 8g + 8h. \$0.00 \$0.00 10. Calculate monthly income. Add line 7 + line 9. \$4,366.46 \$3,728.35 \$8,094.81 Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. \$0.00 Specify: 11. 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly 12. \$8,094.81 income. Write that amount on the Summary of Your Assets and Liabilities and Certain Statistical Information, Combined if it applies. monthly income 13. Do you expect an increase or decrease within the year after you file this form? None. The son does not contribute to the household. Yes. Explain:

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Debtor 1 Debtor 2	Tony Edward Giddens Terri Lynne Giddens	Ca	ase number (if known)	
5h. Other	Payroll Deductions (details)	For Debtor 1	For Debtor 2 or non-filing spouse	<u>) </u>
Life I	nsurance	\$21	.45 \$10.03	
Char	itable Contributions		\$5.00	_
		Totals: \$21	45 \$15.03	

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F	ill in this inforn	nation to identif	y your case:			Cho	ck if this	ic	
	Debtor 1	Tony First Name	Edward Middle Name	Gidde Last Na			An ame	ended filing ement showing	postpetition
	Debtor 2 (Spouse, if filing)	Terri First Name	Lynne Middle Name	Gidde Last Na				13 expenses a	
	United States Bank	ruptcy Court for the:	WESTERN DIST	RICT OF	OKLAHOMA		MM / D	D / YYYY	_
	Case number (if known)	-							
Ot	fficial Form 10)6J							
Sc	chedule J: Yo	our Expenses	;						12/15
nai	rrect information. I	•	eded, attach another ver every question.	-	ing together, both a his form. On the top	-			
1.	Is this a joint cas	se?							
2.	✓ No ☐ Ye Do you have dep	Debtor 2 live in a se s. Debtor 2 must file endents?		·	s for Separate House Dependent's relati	ionship		Dependent's	Does dependent
	Do not list Debtor Debtor 2.	Tand —	for each dependent.		_	r 2		age	_ <u>live with you?</u> ☐ No
	Do not state the d names.	ependents'			Son			31	Yes No Ses No No No No
									-
3.	Do your expense expenses of peo yourself and you	ple other than	✓ No☐ Yes						
P	art 2: Estima	ate Your Ongoir	ng Monthly Expe	enses					
to ı	•	of a date after the		-	re using this form a supplemental Sche	_	-	-	
		d for with non-cash have included it on	-	-				Your expen	ses
4.		ne ownership exper page payments and a					4	1	\$1,000.00
	If not included in	line 4:							
	4a. Real estate t	axes					4	la	\$0.00
	4b. Property, hor	meowner's, or renter'	s insurance				4	łb	\$0.00
	4c. Home mainte	enance, repair, and u	pkeep expenses				4	łc	\$100.00
	4d. Homeowner's	s association or cond	lominium dues				4	ld	\$0.00

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Debtor 1 Tony Edward Giddens
Debtor 2 Terri Lynne Giddens

Case number (if known)

		Your expenses	
5.	Additional mortgage payments for your residence, such as home equity loans	5.	\$0.00
6.	Utilities:		
	6a. Electricity, heat, natural gas	6a	\$320.00
	6b. Water, sewer, garbage collection	6b.	\$140.00
	6c. Telephone, cell phone, Internet, satellite, and	6c	\$500.00
	cable services 6d. Other. Specify:	6d.	\$0.00
7.	Food and housekeeping supplies	- <u></u> 7.	\$980.00
8.	Childcare and children's education costs	8.	\$0.00
9.	Clothing, laundry, and dry cleaning	9.	\$200.00
10.	Personal care products and services	10.	\$140.00
11.	Medical and dental expenses	11.	\$150.00
12.	Transportation. Include gas, maintenance, bus or train	12.	\$600.00
13	fare. Do not include car payments. Entertainment, clubs, recreation, newspapers,	13.	\$120.00
	magazines, and books		
	Charitable contributions and religious donations	14.	\$400.00
15.	Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20.		
	15a. Life insurance	15a	\$0.00
	15b. Health insurance	15b	\$0.00
	15c. Vehicle insurance	15c	\$370.00
	15d. Other insurance. Specify:	15d.	\$0.00
16.	Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify:	16.	\$0.00
17.	Installment or lease payments:		
	17a. Car payments for Vehicle 1	17a	\$0.00
	17b. Car payments for Vehicle 2 Student Loan	17b	\$0.00
	17c. Other. Specify:	17c	\$843.00
	17d. Other. Specify:	17d	\$0.00
18.	Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	\$0.00
19.	Other payments you make to support others who do not live with you.		
	Specify:	. 19	\$0.00
20.	Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.		
	20a. Mortgages on other property	20a	\$0.00
	20b. Real estate taxes	20b	\$0.00
	20c. Property, homeowner's, or renter's insurance	20c	\$0.00
	20d. Maintenance, repair, and upkeep expenses	20d	\$0.00
	20e. Homeowner's association or condominium dues	20e	\$0.00

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Debtor 1 Debtor 2		Tony Edward Giddens Terri Lynne Giddens	Case number (if known)		
21.	Other.	Specify:	21.	+	
22.	Calcul	ate your monthly expenses.			
	22a.	Add lines 4 through 21.	22a.	\$5,863.00	
	22b.	Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2.	22b.		
	22c.	Add line 22a and 22b. The result is your monthly expenses.	22c.	\$5,863.00	
23.	Calcul	ate your monthly net income.			
	23a.	Copy line 12 (your combined monthly income) from Schedule I.	23a.	\$8,094.81	
	23b.	Copy your monthly expenses from line 22c above.	23b.	_ \$5,863.00	
		Subtract your monthly expenses from your monthly income. The result is your monthly net income.	23c.	\$2,231.81	
24.	Do you	expect an increase or decrease in your expenses within the year after you fil	le this form?		
For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?					
	☑ No				
	☐ Ye	Explain here: None.			

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Fill in this information to identify your case:						
Debtor 1	Tony First Name	Edward Middle Name	Giddens Last Name			
Debtor 2	Terri	Lynne	Giddens			
(Spouse, if filing)	First Name	Middle Name	Last Name			
United States Bar	kruptcy Court for the	: WESTERN DIS	STRICT OF OKLAHOMA			
Case number (if known)						

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

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Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

Р	art 1: Summarize Your Assets	
		Your assets Value of what you own
1.	Schedule A/B: Property (Official Form 106A/B)	
	1a. Copy line 55, Total real estate, from Schedule A/B	\$0.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$89,336.81
	1c. Copy line 63, Total of all property on Schedule A/B	\$89,336.81
Р	art 2: Summarize Your Liabilities	
		Your liabilities Amount you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$83,781.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$8,000.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	+ \$124,501.03
	Your total liabilities	\$216,282.03
P	art 3: Summarize Your Income and Expenses	
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$8,094.81
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$5,863.00

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	otor 1 otor 2	Tony Edward Giddens Terri Lynne Giddens Case nu	mber (if known)	
P	art 4	Answer These Questions for Administrative and Statistical Rec	cords	
6.	Are	you filing for bankruptcy under Chapters 7, 11, or 13?		
		No. You have nothing to report on this part of the form. Check this box and submit this Yes	form to the court with you	other schedules.
7.	Wha	at kind of debt do you have?		
	$\overline{\mathbf{A}}$	Your debts are primarily consumer debts. Consumer debts are those "incurred by an family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purpose.		personal,
		Your debts are not primarily consumer debts. You have nothing to report on this parthis form to the court with your other schedules.	rt of the form. Check this b	oox and submit
3.		m the <i>Statement of Your Current Monthly Income:</i> Copy your total current monthly incial Form 122A-1 Line 11; OR , Form 122B Line 11; OR , Form 122C-1 Line 14.	come from	\$11,232.61
Э.	Сор	by the following special categories of claims from Part 4, line 6 of Schedule E/F:		
			Total claim	
	Fro	m Part 4 on <i>Schedule E/F</i> , copy the following:		
	9a.	Domestic support obligations. (Copy line 6a.)	\$0.00	-
	9b.	Taxes and certain other debts you owe the government. (Copy line 6b.)	\$5,000.00	-
	9c.	Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$0.00	-
	9d.	Student loans. (Copy line 6f.)	\$76,121.00	-
	9e.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$0.00	-
	9f.	Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+ \$70.98	<u>. </u>
	9g.	Total. Add lines 9a through 9f.	\$81,191.98]

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Fill in this inf	Fill in this information to identify your case:								
Debtor 1	Tony First Name	Edward Middle Name	Giddens Last Name						
Debtor 2 (Spouse, if filing)	Terri First Name	Lynne Middle Name	Giddens Last Name						
United States Bar	nkruptcy Court for the	WESTERN DISTR	CICT OF OKLAHOMA						
Case number (if known)					Check if this is an amended filing				
Official Form	106Dec								
Declaration	About an Indi	vidual Debtor	's Schedules						
If two married people are filing together, both are equally responsible for supplying correct information.									
You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.									
Sig	Sign Below								

Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?

No

Yes. Name of person

Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.

X /s/ Tony Edward Giddens
Tony Edward Giddens, Debtor 1

X /s/ Terri Lynne Giddens
Terri Lynne Giddens, Debtor 2

Date 04/17/2023

MM / DD / YYYY

Date 04/17/2023

MM / DD / YYYY

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Fill in this in	formation to iden	tify your ca	ase:			
Debtor 1	Tony	Edward	Giddens			
	First Name	Middle Name	Last Name			
Debtor 2 (Spouse, if filing	Terri) First Name	Lynne Middle Name	Giddens Last Name			
		. WESTERN	DISTRICT OF O	CI AHOMA		
	ankruptcy Court for the	E WESTERN	DISTRICTOFOR	<u>KLAHUWIA</u>		
Case number (if known)					☐ Check if th amended f	
Official Form	า 107					
Statement of	of Financial Af	fairs for I	ndividuals F	iling for Bankr	uptcy	04/22
correct informati your name and c	on. If more space is ase number (if knowr	needed, attac n). Answer ev	h a separate sheet very question.		e equally responsible for sopport any additional pages	
	r current marital statu					
☑ No	ast 3 years, have you t all of the places you l	•		e you live now?	w.	
(Community	-			•	i ity property state or territ ada, New Mexico, Puerto F	•
✓ No ☐ Yes. Ma	ke sure you fill out <i>Scl</i>	hedule H: You	r Codebtors (Official	Form 106H).		
Part 2: Ex	plain the Sources	s of Your Ir	ncome			
Fill in the total	al amount of income yo	ou received fro	m all jobs and all bu	rusiness during this your isinesses, including par lether, list it only once u		llendar years?
Yes. Fill	in the details.					
		Deb	tor 1		Debtor 2	
			ces of income all that apply.	Gross income (before deductions and exclusions	Sources of income Check all that apply.	Gross income (before deductions and exclusions
From January 1 of the date you filed	of the current year un I for bankruptcy:	_	ages, commissions, nuses, tips	\$16,788.85	₩ages, commissions, bonuses, tips	\$16,522.26 (est.)
		□op	perating a business		Operating a business	
For last calendar	year:	_	ages, commissions, nuses, tips	\$70,503.24 (est.)	₩ Wages, commissions, bonuses, tips	\$53,919.14 (est.)
(January 1 to Dec	ember 31, <u>2022</u>) YYYY	_	perating a business		Operating a business	
For the calendar	•		ages, commissions, nuses, tips	\$112,345.00	₩ages, commissions, bonuses, tips	
(January 1 to Dec	anuary 1 to December 31, 2021) Operating a business Operating a business					

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5.	5. Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security; unemployment; and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1.				
	List eacl	n source a	nd the gross income from each source separ	rately. Do not include income that you listed in line 4.	
	✓ No ☐ Yes	. Fill in the	e details.		
P	art 3:	List Ce	ertain Payments You Made Before	You Filed for Bankruptcy	
6.	Are eith	er Debtor	1's or Debtor 2's debts primarily consume	r debts?	
	□ No.		Debtor 1 nor Debtor 2 has primarily cons d by an individual primarily for a personal, fa	umer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as mily, or household purpose."	
		During t	the 90 days before you filed for bankruptcy, c	lid you pay any creditor a total of \$7,575* or more?	
		☐ No.	Go to line 7.		
		Yes.	total amount you paid that creditor. Do not	a total of \$7,575* or more in one or more payments and the include payments for domestic support obligations, such as lude payments to an attorney for this bankruptcy case.	
		* Subje	ct to adjustment on 4/01/25 and every 3 year	s after that for cases filed on or after the date of adjustment.	
	✓ Yes	Debtor	1 or Debtor 2 or both have primarily cons	umer debts.	
	_	During t	the 90 days before you filed for bankruptcy, c	lid you pay any creditor a total of \$600 or more?	
		✓ No.	Go to line 7.		
		Yes.	• •	a total of \$600 or more and the total amount you paid that estic support obligations, such as child support and alimony. by for this bankruptcy case.	
7.	Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations such as child support and alimony.				
	✓ No ☐ Yes	. List all p	ayments to an insider.		
8.		year befo		any payments or transfer any property on account of a debt that	
	Include	payments	on debts guaranteed or cosigned by an insid	эг.	
	✓ No ☐ Yes	. List all p	ayments that benefited an insider.		

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	tor 1 tor 2	Tony Edward Giddens Terri Lynne Giddens	Case number (if known)
Pa	art 4:	Identify Legal Actions, Repossessions, and Foreclosure	es
9.	List all s	year before you filed for bankruptcy, were you a party in any lawsuit, uch matters, including personal injury cases, small claims actions, divorce tions, and contract disputes.	· · · · · · · · · · · · · · · · · · ·
	✓ No ☐ Yes	. Fill in the details.	
10.	seized,	year before you filed for bankruptcy, was any of your property repose or levied? Il that apply and fill in the details below.	sessed, foreclosed, garnished, attached,
		Go to line 11. Fill in the information below.	
11.		0 days before you filed for bankruptcy, did any creditor, including a b s from your accounts or refuse to make a payment because you owed	· · · · · · · · · · · · · · · · · · ·
	✓ No ☐ Yes	. Fill in the details.	
12.		year before you filed for bankruptcy, was any of your property in the s, a court-appointed receiver, a custodian, or another official?	possession of an assignee for the benefit of
	✓ No ☐ Yes		
Pa	art 5:	List Certain Gifts and Contributions	
13.	Within 2	years before you filed for bankruptcy, did you give any gifts with a to	tal value of more than \$600 per person?
	✓ No ☐ Yes	. Fill in the details for each gift.	
14.	Within 2 to any c	years before you filed for bankruptcy, did you give any gifts or contri harity?	butions with a total value of more than \$600
	✓ No ☐ Yes	. Fill in the details for each gift or contribution.	
Pa	art 6:	List Certain Losses	
15.		year before you filed for bankruptcy or since you filed for bankruptcy saster, or gambling?	, did you lose anything because of theft, fire,
	✓ No ☐ Yes	. Fill in the details.	

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Debtor 1 Tony Edward Giddens Debtor 2 Terri Lynne Giddens						Case number (if known)		
Pa	rt 7:	List C	ertain P	ayments or	Transfers			
		-	-		ptcy, did you or anyone else acting nkruptcy or preparing a bankruptc		or transfer any pro	perty to
	□ No	,	•	ruptcy petition p	oreparers, or credit counseling agend	cies for services requi	red for your bankrupt	cy.
Γhe	Goodi	s. Fill in th ing Law F Was Paid		•	Description and value of any pro Attoroney Fees \$500.00 Filing Fee \$313.00	operty transferred	Date payment or transfer was made	Amount of payment
204 Numb		binson Av	renue, S	uite 1235	Credit Report/Financial Repo Credit Counseling \$37.00 Debtors Education \$50.00	orts \$200.00	01/06/2023	\$1,100.00
Okla City	<u>ahoma</u>	City	OK State	73102 ZIP Code	-			
		ite address		· ·	_			
17.	Within	-	ore you fi	iled for bankru	ptcy, did you or anyone else acting with your creditors or to make payr			perty to
	☑ No			t or transfer tha	t you listed on line 16.			
	8. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as granting of a security interest or mortgage on your property).							
	☑ No	-		isieis tilat you i	have already listed on this statement			
	you ard ☑ No	e a benefic	ciary? (truptcy, did you transfer any propen called asset-protection devices.)	erty to a self-settled t	trust or similar devic	e of which

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Debtor 1 Debtor 2	,			Case number (i	Case number (if known)			
Part	8: List Certai	n Financial Ac	counts, Instruments, S	afe Deposit Boxes, a	nd Storage Units			
bei Inc	nefit, closed, sold, n lude checking, savin	moved, or transfer gs, money market, cooperatives, asso	uptcy, were any financial acc red? or other financial accounts; co ociations, and other financial in	ertificates of deposit; shares				
Arvest	Bank		Last 4 digits of account number	Type of account or instrument	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer		
	Financial Institution		- XXXX- 7 6 2 0	⊘ Checking	11/2022	\$0.00		
PO Box 799 Number Street			Savings Money market Brokerage Other					
Lowell City	A St	R 72745 ate ZIP Code	_	_				
	 21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables? No 							
 Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy? No Yes. Fill in the details. 								
Part	9: Identify Pr	operty You Ho	ld or Control for Some	one Else				
	you hold or control hold in trust for son	• • • •	t someone else owns? Inclu	ıde any property you borr	owed from, are stori	ng for,		
✓ No ☐ Yes. Fill in the details.								

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	otor 1 otor 2	Tony Edward Giddens Terri Lynne Giddens	Case number (if known)
P	art 10:	Give Details About Environmental Information	
or	the pur	pose of Part 10, the following definitions apply:	
ı	nazardo	mental law means any federal, state, or local statute or regulation con us or toxic substance, wastes, or material into the air, land, soil, surfa g statutes or regulations controlling the cleanup of these substances,	ce water, groundwater, or other medium,
		ans any location, facility, or property as defined under any environmer or used to own, operate, or utilize it, including disposal sites.	ntal law, whether you now own, operate, or
		ous material means anything an environmental law defines as a hazard ce, hazardous material, pollutant, contaminant, or similar item.	lous waste, hazardous substance, toxic
Rep	ort all n	otices, releases, and proceedings that you know about, regardless of	when they occurred.
24.	Has an law?	y governmental unit notified you that you may be liable or potentially	liable under or in violation of an environmental
25.	Have y ✓ No	s. Fill in the details. ou notified any governmental unit of any release of hazardous materia	ıl?
26.	_	s. Fill in the details. ou been a party in any judicial or administrative proceeding under any	environmental law? Include settlements and
	✓ No ☐ Yes	s. Fill in the details.	
P	art 11:	Give Details About Your Business or Connections to A	ny Business
27.	Within busine	4 years before you filed for bankruptcy, did you own a business or hass?	ve any of the following connections to any
		A partner in a partnership	nip (LLP)
		. None of the above applies. Go to Part 12. s. Check all that apply above and fill in the details below for each business	S.
28.		2 years before you filed for bankruptcy, did you give a financial staten ncial institutions, creditors, or other parties.	nent to anyone about your business? Include
	□ No	s. Fill in the details below	

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Debtor 1 Tony Edward Giddens	
Debtor 2 Terri Lynne Giddens	Case number (if known)
Part 12: Sign Below	
that the answers are true and correct. I	ent of Financial Affairs and any attachments, and I declare under penalty of perjury understand that making a false statement, concealing property, or obtaining money or pankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, and 3571.
X /s/ Tony Edward Giddens	X /s/ Terri Lynne Giddens
Tony Edward Giddens, Debtor 1	Terri Lynne Giddens, Debtor 2
Date <u>04/17/2023</u>	Date 04/17/2023
Did you attach additional pages to Your	Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?
☑ No □ Yes	
Did you pay or agree to pay someone w	ho is not an attorney to help you fill out bankruptcy forms?
☑ No	
Yes. Name of person	Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).
	Deciaration and Stonature (Official Form 119)

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Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

- You are an individual filing for bankruptcy, and
- Your debts are primarily consumer debts.
 Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of the Bankruptcy Code:

- Chapter 7 -- Liquidation
- Chapter 11 -- Reorganization
- Chapter 12 -- Voluntary repayment plan for family farmers or fishermen
- Chapter 13 -- Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7: Liquidation

+	\$78	filing fee administrative fee trustee surcharge
	\$338	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their non-exempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that the even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

- most taxes;
- most student loans;
- domestic support and property settlement obligations;

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- most fines, penalties, forfeitures, and criminal restitution obligations; and
- certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

- fraud or theft;
- fraud or defalcation while acting in breach of fiduciary capacity;
- intentional injuries that you inflicted; and
- death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A-1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A-2).

If your income is above the median for your state, you must file a second form--the *Chapter 7 Means Test Calculation* (Official Form 122A-2). The calculations on the form-sometimes called the *Means Test*--deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If your income is more than the median income

for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

+		filing fee administrative fee	
	\$1,738	total fee	

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

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Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

\$200 filing fee \$78 administrative fee \$278 total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

\$235 filing fee \$78 administrative fee \$313 total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

- domestic support obligations,
- most student loans,
- certain taxes,
- debts for fraud or theft,
- debts for fraud or defalcation while acting in a fiduciary capacity,
- most criminal fines and restitution obligations,
- certain debts that are not listed in your bankruptcy papers.
- certain debts for acts that caused death or personal injury, and
- certain long-term secured debts.

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Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and local rules of the court.

For more information about the documents and their deadlines, go to:

http://www.uscourts.gov/forms/bankruptcy-forms

Bankruptcy crimes have serious consequences

- If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury--either orally or in writing--in connection with a bankruptcy case, you may be fined, imprisoned, or both.
- All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together-called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from:

http://www.uscourts.gov/servicesforms/bankruptcy/credit-counseling-and-debtoreducation-courses.

In Alabama and North Carolina, go to: http://www.uscourts.gov/servicesforms/bankruptcy/credit-counseling-and-debtoreducation-courses.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

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B2030 (Form 2030) (12/15)

UNITED STATES BANKRUPTCY COURT WESTERN DISTRICT OF OKLAHOMA OKLAHOMA CITY DIVISION

In re	Tony Edward Giddens	Case No.	
	Terri Lynne Giddens		
		Chapter	13

	onapioi <u>iv</u>			
	DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR			
1.	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:			
	For legal services, I have agreed to accept			
	Prior to the filing of this statement I have received			
	Balance Due			
2.	The source of the compensation paid to me was: ☑ Debtor ☐ Other (specify)			
3.	The source of compensation to be paid to me is:			
	☑ Debtor ☐ Other (specify)			
4.	I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.			
	☐ I have agreed to share the above-disclosed compensation with another person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation, is attached.			
5.	In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:			
	a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;			
	b. Preparation and filing of any petition, schedules, statements of affairs and plan which may be required;			
	c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;			
	d. [Other provisions as needed]			
	Negotiations with secured creditors to reduce to market value; exemption planning; preparation and filing of			

Negotiations with secured creditors to reduce to market value; exemption planning; preparation and filing of reaffirmation agreements and applications as needed; preparation and filing of motions pursuant to 11 USC 522(f) (2)(A) for avoidance of liens on household goods.

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B2030 (Form 2030) (12/15)

6. By agreement with the debtor(s), the above-disclosed fee does not include the following services:

The fees DOES NOT INCLUDE: Representation of the debtors in any dischargeability actions, judicial lien avoidances, relief from stay actions or any other adversary proceeding.

CERTIFICATION

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

04/17/2023 /s/ O. Clifton Gooding

Date

O. Clifton Gooding
The Gooding Law Firm, P.C.
204 N. Robinson Avenue, Suite 1235
Oklahoma City, Oklahoma 73102

Phone: (405) 948-1978 / Fax: (405) 948-0864

Bar No. 10315

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UNITED STATES BANKRUPTCY COURT WESTERN DISTRICT OF OKLAHOMA OKLAHOMA CITY DIVISION

IN RE: Tony Edward Giddens
Terri Lynne Giddens

CASE NO

CHAPTER 13

VERIFICATION OF CREDITOR MATRIX

know	The above named Debtor hereby verifies that the attached list of creditors is true and correct to the best of his/her knowledge.				
Date	4/17/2023	Signature	/s/ Tony Edward Giddens Tony Edward Giddens		
Date	4/17/2023	Signature	/s/ Terri Lynne Giddens		

Terri Lynne Giddens

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American Collection Services Attn: Bankruptcy 3100 SW 59th St. Oklahoma City, OK 73119

Ameripath Oklahoma City Diagnostic Pathology Services PO Box 740976 Cincinnati, OH 45274-0976

AMR, LLC PO Box 60607 Oklahoma City, OK 73146-0607

Aspire Credit Card Attn: Bankruptcy PO Box 105555 Atlanta, GA 30348

B&F Corp 2303 N Broadway Oklahoma City, OK 73103

CAC Financial Corp 2601 NW Expressway Suite 100E Oklahoma City, OK 73112-7238

Capital One Attn: Bnakruptcy P.O. Box 30285 Salt Lake City, UT 84130

Capital One Auto Finance Attn: Bankruptcy 7933 Preston Rd Plano, TX 75024

Cashworld 5730 NW 39th Street Oklahoma City, OK 73122 Case: 23-10950 Doc: 1 Filed: 04/17/23 Page: 71 of 86

CBSA Collections PO Box 1929 Stillwater, OK 74076-1929

CFNA/Credit First Natl Assoc Attn: Bankruptcy PO Box 81315 Cleveland, OH 44181

Comenity/MPRC Attn: Bankruptcy PO Box 182125 Columbus, OH 43218

Communication FCU Attn: Bankruptcy 4141 NW Expressway, Ste 200 Oklahoma, OK 73116

Conn's HomePlus 2445 Technology Forest Boulevard Building 4, Suite 800 The Woodlands, TX 77381

Continental Finance Company Attn: Bankruptcy PO Box 8099 Newark, DE 19714

Credit One Bank Attn: Bankruptcy Department PO Box 98873 Las Vegas, NV 89193

Digestive Disease Specialists, Inc. PO Box 7316 Edmond, OK 73083-7316

Enhanced Recovery Company Attn: Bankruptcy 8014 Bayberry Road Jacksonville, FL 32256 Case: 23-10950 Doc: 1 Filed: 04/17/23 Page: 72 of 86

First Savings Bank Attn: Bankruptcy P.O. Box 5019 Sioux Falls, SD 57117

Fortiva Attn: Bankruptcy PO Box 105555 Atlanta, GA 30348

Genesis FS Card Attn: Bankruptcy PO Box 4477 Beaverton, OR 97076

Genesis FS Card Services Attn: Bankruptcy PO Box 4477 Beaverton, OR 97076

Integris PO Box 258877 Oklahoma City, OK 73125

IRS PO Box 7346 Philadelphia, PA 19101-7346

Kohls/Capital One Attn: Credit Administrator PO Box 3043 Milwaukee, WI 53201

Merrick Bank Corp Po Box 9201 Old Bethpage, NY 11804

Morgan & Associates 2601 N.W. Expressway Suite 205 East Oklahoma City, OK 73112 Case: 23-10950 Doc: 1 Filed: 04/17/23 Page: 73 of 86

Navient Solutions Inc Attn: Bankruptcy P.O. Box 9500 Wilkes-Barre, PA 18773

Northwest Anesthesia PC PO Box 840850 Dallas, TX 75284-0850

Oakdale & Associates 18 Campus Blvd., Suite 100 Newtown, PA 19073

Oklahoma City Gynecology & Obstetrics PO Box 14000 Belfast, ME 04915-4033

Oklahoma Tax Commission Attn: Legal Bankruptcy PO Box 269056 Oklahoma City, OK 73126-0956

OneMain Financial Attn: Bankruptcy PO Box 3251 Evansville, IN 47731

Performance Finance 1515 W 22nd Street Oak Brook, IL 60523

Plain Green Loans PO Box 270 Box Elder, MT 595.21

Radiology Associates LLC Department 960591 Oklahoma City, OK 73196-0591 Case: 23-10950 Doc: 1 Filed: 04/17/23 Page: 74 of 86

Radiology Associates, LLC 3330 NW 56th Street Suite 206 Oklahoma City, OK 73112-4426

Security Finance Attn: Centralized Bankruptcy PO Box 1893 Spartanburg, SC 29304

Surgical Partners of Oklahoma 1808 Commons Cir Suite A Yukon, OK 73099-9518

Synchrony Bank/Walmart Attn Bankruptcy PO Box 31293 Salt Lake City, UT 84131

Synchrony/PayPal Credit Attn: Bankruptcy PO Box 965060 Orlando, FL 32896

Synerprise Consulting Services, Inc Attn: Bankruptcy 5651 Broadmoor Mission, KS 66202

The Gooding Law Firm, P.C. 204 N. Robinson Avenue, Suite 1235 Oklahoma City, Oklahoma 73102

Transworld Systems Inc PO Box 15270 Wilmington, DE 19850-5270

World Finance Corporat Po Box 6429 Greenville, SC 29607 Case: 23-10950 Doc: 1 Filed: 04/17/23 Page: 75 of 86

Fill in this i	nformation to id	ontify your caso			Check as	directed in lines 1	17 and 21:
Debtor 1	Tony First Name	Edward Middle Name	Giddens Last Name			the calculations requir	
Debtor 2 (Spouse, if filir	Terri ng) First Name	Lynne Middle Name	Giddens Last Name		under 1	ble income is not dete I U.S.C. § 1325(b)(3).	
United States I	Bankruptcy Court for	the: WESTERN DIS	STRICT OF OKLA	HOMA		ble income is determir I U.S.C. § 1325(b)(3).	ned
Case number (if known)					—	nmitment period is 3 yearmitment period is 5 yearmitment	
Official For	m 122C-1				Check if the	nis is an amended filin	g
and Calcu	3 Statement o lation of Com	mitment Perio	od				10/19
accurate. If mo information app	ore space is needed, plies. On the top of	attach a separate sl any additional pages	neet to this form. In s, write your name	nclude the	line number to v		3
	Calculate Your A	,					
•	ur marital and filing		only.				
_	arried. Fill out Colun						
✓ Marrie	ed. Fill out both Colu	mns A and B, lines 2-	11.				
bankruptcy August 31. in the resul	y case. 11 U.S.C. § If the amount of you	101(10A). For example monthly income variations income amount more	ole, if you are filing o ed during the 6 mon e than once. For exa	n Septemb ths, add the ample, if bo	er 15, the 6-mont income for all 6 th spouses own t	nonths before you file h period would be Mar months and divide the he same rental propert e space.	ch 1 through total by 6. Fill
					Column A Debtor 1	Column B Debtor 2 or non-filing spouse	
	s wages, salary, tips payroll deductions).	, bonuses, overtime	, and commissions		\$5,569.76	\$5,662.85	
3. Alimony a	nd maintenance pay	ments. Do not include	de payments from a	spouse.	\$0.00	\$0.00	
expenses of regular con your depen	ts from any source work of you or your dependentions from an undents, parents, and room onto include paymen	ndents, including ch married partner, mem commates. Do not in	ild support. Include bers of your househ clude payments fron	old,	\$0.00	\$0.00	
5. Net income	e from operating a b	usiness, profession	, or farm				
		Debtor 1	Debtor 2				
deductions	,	\$0.00	\$0.00				
expenses	nd necessary operatir	• • • • • • • • • • • • • • • • • • • •	\$0.00	Сору	\$0.00	\$0.00	
Net monthly	y income from a busii	ness, 	\$0.00	here →	Ψυ.υυ	<u></u>	

profession, or farm

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	tor 1 tor 2	Tony Edward Giddens Terri Lynne Giddens			C	ase number (if k	nown)	
						Column A Debtor 1	Column B Debtor 2 or non-filing spouse	3
6.	Net in	come from rental and other	real property					
			Debtor 1	Debtor 2				
	Gross deduct	receipts (before all tions)	\$0.00	\$0.00				
	Ordina expens	ary and necessary operating			Comu			
	Net mo	onthly income from rental or real property	\$0.00	\$0.00	Copy here →	\$0.00	\$0.00	
7.	Intere	st, dividends, and royalties				\$0.00	\$0.00	
8.	Unem	ployment compensation				\$0.00	\$0.00	
		enter the amount if you cont t under the Social Security Ac						
	For	you		\$0.	00			
	For	your spouse		\$0.	00_			
	disabil uniforr of title amour	nce paid by the United States ity, combat-related injury or d med services. If you received 10, then include that pay only at of retired pay to which you hany provision of title 10 other	isability, or death of a any retired pay paid to extent that it doe would otherwise be e	a member of the l under chapter 61 s not exceed the ntitled if retired				
10.	amour payme interna or allor disabil uniforr	ne from all other sources no nt. Do not include any benefit ents received as a victim of a ational or domestic terrorism; wance paid by the United Sta ity, combat-related injury or d med services. If necessary, li ut the total below.	s received under the war crime, a crime agor compensation, pe tes Government in coisability, or death of a	Social Security A gainst humanity, on nsion, pay, annuit onnection with a a member of the	ct; r			
11		amounts from separate pages	•				+	
	Add lir	nes 2 through 10 for each colu add the total for Column A to t	umn. the total for Column I			\$5,569.76	+ \$5,662.85	= \$11,232.61 Total average monthly income
Pa	art 2:	Determine How to N	leasure Your De	eductions fron	n Income	9		
12	Conv	vour total average monthly	income from line 11	Ì				\$11.232.61

Official Form 122C-1

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Debt Debt		Tony Edward Giddens Terri Lynne Giddens Case number (if known)				
13.		ulate the marital adjustment. Check one: You are not married. Fill in 0 below. You are married and your spouse is filing with you. Fill in 0 below. You are married and your spouse is not filing with you. Fill in the amount of the income listed in line 11, Column B, that was NOT regularly paid for the household expenses of you or your dependents, such as payment of the spouse's tax liability or the spouse's support of someone other than you or your dependents. Below, specify the basis for excluding this income and the amount of income devoted to each purpose. If necessary, list additional adjustments on a separate page. If this adjustment does not apply, enter 0 below.				
		Total	\$0.00			
14.	You	current monthly income. Subtract the total in line 13 from line 12.	\$11,232.61			
15.	Calc	ulate your current monthly income for the year. Follow these steps:				
	15a.	Copy line 14 here ->	\$11,232.61			
		Multiply line 15a by 12 (the number of months in a year).	(12			
	15b.	The result is your current monthly income for the year for this part of the form.	\$134,791.32			
16.	Calc	ulate the median family income that applies to you. Follow these steps:				
	16a.	Fill in the state in which you live. Oklahoma				
	16b.	Fill in the number of people in your household.				
	16c.	Fill in the median family income for your state and size of household To find a list of applicable median income amounts, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office.	\$77,166.00			
17.		do the lines compare?				
	17a. 17b.	Line 15b is less than or equal to line 16c. On the top of page 1 of this form, check box 1, <i>Disposable income is not under 11 U.S.C.</i> § 1325(b)(3). Go to Part 3. Do NOT fill out Calculation of Your Disposable Income (Official Form Line 15b is more than line 16c. On the top of page 1 of this form, check box 2, <i>Disposable income is determined ut 11 U.S.C.</i> § 1325(b)(3). Go to Part 3 and fill out Calculation of Your Disposable Income (Official Form 122C-2)	122C-2). nder			
		On line 39 of that form, copy your current monthly income from line 14 above.				
Pa	rt 3	Calculate Your Commitment Period Under 11 U.S.C. § 1325(b)(4)				
18.	Сор	your total average monthly income from line 11.	\$11,232.61			
	that	act the marital adjustment if it applies. If you are married, your spouse is not filing with you, and you contend calculating the commitment period under 11 U.S.C. § 1325(b)(4) allows you to deduct part of your spouse's ne, copy the amount from line 13.				
	19a.	If the marital adjustment does not apply, fill in 0 on line 19a.	\$0.00			
	19b.	Subtract line 19a from line 18.	\$11,232.61			
20.	Calc	ulate your current monthly income for the year. Follow these steps:				
		Copy line 19b	\$11,232.61			
		Multiply by 12 (the number of months in a year).	(12			
	20b.	The result is your current monthly income for the year for this part of the form.	\$134,791.32			
	20c. Copy the median family income for your state and size of household from line 16c					

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Debtor 1 Tony Edward Giddens Debtor 2 Terri Lynne Giddens		Tony Edward Giddens Terri Lynne Giddens	Case number (if known)			
21.	How	do the lines compare?	Case Hulliber (II KHOWII)			
		•	e ordered by the court, on the top of page 1 of this form, . Go to Part 4.			
	Line 20b is more than or equal to line 20c. Unless otherwise ordered by the court, on the top of page 1 of this form, check box 4, <i>The commitment period is 5 years</i> . Go to Part 4.					
Pa	art 4	Sign Below				
	By s	igning here, under penalty of perjury I declare tha	at the information on this statement and in any attachments is true and correct.			
	X /s	s/ Tony Edward Giddens	★ /s/ Terri Lynne Giddens			
	T	ony Edward Giddens, Debtor 1	Terri Lynne Giddens, Debtor 2			
	D	Date 4/17/2023 MM / DD / YYYY	Date <u>4/17/2023</u> MM / DD / YYYY			

If you checked 17a, do NOT fill out or file Form 122C-2.

If you checked 17b, fill out Form 122C-2 and file it with this form. On line 39 of that form, copy your current monthly income from line 14 above.

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Fill in this info	ormation to iden	tify your case:		
Debtor 1	Tony First Name	Edward Middle Name	Giddens Last Name	
Debtor 2	Terri	Lynne	Giddens	
(Spouse, if filing)		Middle Name	Last Name	
United States Bar	nkruptcy Court for the	: WESTERN DIST	RICT OF OKLAHOMA	
Case number				
(if known)				☐ Check if

Official Form 122C-2

Chapter 13 Calculation of Your Disposable Income

04/22

To fill out this form, you will need your completed copy of Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period (Official Form 122C-1).

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

Part 1: Calculate Your Deductions from Your Income

The Internal Revenue Service (IRS) issues National and Local Standards for certain expense amounts. Use these amounts to answer the questions in lines 6-15. To find the IRS standards, go online using the link specified in the separate instructions for this form. This information may also be available at the bankruptcy clerk's office.

Deduct the expense amounts set out in lines 6-15 regardless of your actual expense. In later parts of the form, you will use some of your actual expenses if they are higher than the standards. Do not include any operating expenses that you subtracted from income in lines 5 and 6 of Form 122C-1, and do not deduct any amounts that you subtracted from your spouse's income in line 13 of Form 122C-1.

If your expenses differ from month to month, enter the average expense.

Note: Line numbers 1-4 are not used in this form. These numbers apply to information required by a similar form used in chapter 7 cases.

5. The number of people used in determining your deductions from income

Fill in the number of people who could be claimed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support. This number may be different from the number of people in your household.

3

National Standards You must use the IRS National Standards to answer the questions in lines 6-7.

6. Food, clothing and other items: Using the number of people you entered in line 5 and the IRS National Standards, fill in the dollar amount for food, clothing, and other items.

\$1,610.00

7. Out-of-pocket health care allowance: Using the number of people you entered in line 5 and the IRS National Standards, fill in the dollar amount for out-of-pocket health care. The number of people is split into two categories--people who are under 65 and people who are 65 or older--because older people have a higher IRS allowance for health care costs. If your actual expenses are higher than this IRS amount, you may deduct the additional amount on line 22.

People who are under 65 years of age \$75.00 7a. Out-of-pocket health care allowance per person 7b. Number of people who are under 65 X 3 Copy \$225.00 \$225.00 7c. Subtotal. Multiply line 7a by line 7b. here People who are 65 years of age or older 7d. Out-of-pocket health care allowance per person \$153.00 7e. Number of people who are 65 or older Х Copy \$0.00 7f. Subtotal. Multiply line 7d by line 7e. \$0.00 here Copy \$225.00 \$225.00 7g. Total. Add lines 7c and 7f..... here -3

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Debto Debto		•	ard Giddens ne Giddens	Case number (if known)	
Loca	al Sta	ndards	You must use the IRS Local Sta	andards to answer the questions in lines 8-15.	
			from the IRS, the U.S. Trustee Press into two parts:	rogram has divided the IRS Local Standard for housing	
		•	es Insurance and operating exp es Mortgage or rent expenses	penses	
the l	ink s	•	e separate instructions for this f	stee Program chart. To find the chart, go online using form. This chart may also be available at the	
8.		-	ties Insurance and operating exount listed for your county for insur	xpenses: Using the number of people you entered in line 5, rance and operating expenses.	\$684.00
9.	Hous	ing and utili	ties Mortgage or rent expenses	s:	
		•	mber of people you entered in line sty for mortgage or rent expenses.	5, fill in the dollar amount listed \$1,215.00	
		Total average your home.	e monthly payment for all mortgage	es and other debts secured by	
		contractually	he total average monthly payment, due to each secured creditor in the Next divide by 60.		
		Name of the	e creditor	Average monthly payment	
	-			<u> </u>	
				_+	
	,	9b. Total ave	erage monthly payment	\$0.00 Copy here - \$0.00 Repeat this amount on line 33a.	
	9c.	Net mortgage	or rent expense.		
			9b (total average monthly payment). If this number is less than \$0, er		\$1,215.00
10.	•			ion of the IRS Local Standard for housing is incorrect ises, fill in any additional amount you claim.	
	Expla	ain			
11.		•	•	of vehicles for which you claim an ownership or operating expense.	
		0. Go to line 1. Go to line 2 or more. G	12.		
12.	Vehic	cle operation	expense: Using the IRS Local St	tandards and the number of vehicles for which you claim the pply for your Census region or metropolitan statistical area.	\$534.00

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Debtor 1 **Tony Edward Giddens** Debtor 2 Terri Lynne Giddens Case number (if known) 13. Vehicle ownership or lease expense: Using the IRS Local Standards, calculate the net ownership or lease expense for each vehicle below. You may not claim the expense if you do not make any loan or lease payments on the vehicle. In addition, you may not claim the expense for more than two vehicles. Vehicle 1 Describe Vehicle 1: 2017 Ford F150 13a. Ownership or leasing costs using IRS Local Standard. \$588.00 13b. Average monthly payment for all debts secured by Vehicle 1. Do not include costs for leased vehicles. To calculate the average monthly payment here and on line 13e, add all amounts that are contractually due to each secured creditor in the 60 months after you file for bankruptcy. Then divide by 60. Name of each creditor for Vehicle 1 Average monthly payment **Communication FCU** \$395.00 Repeat this Copy amount on Total average monthly payment \$395.00 \$395.00 here line 33b. Copy net Vehicle 1 13c. Net Vehicle 1 ownership or lease expense. expense Subtract line 13b from line 13a. If this number is less than \$0, enter \$0. \$193.00 \$193.00 here -Vehicle 2 Describe Vehicle 2: 2016 Indian Roadmaster \$588.00 13d. Ownership or leasing costs using IRS Local Standard. 13e. Average monthly payment for all debts secured by Vehicle 2. Do not include costs for leased vehicles. Name of each creditor for Vehicle 2 Average monthly payment

Performance Finance \$448.00

Repeat this Copy amount on \$448.00 \$448.00 Total average monthly payment here line 33c.

13f. Net Vehicle 2 ownership or lease expense. Subtract line 13e from 13d. If this number is less than 0, enter 0.

Vehicle 2 expense \$140.00 here -

Copy net

14. Public transportation expense: If you claimed 0 vehicles in line 11, using the IRS Local Standards, fill in the Public Transportation expense allowance regardless of whether you use public transportation.

\$0.00

\$140.00

15. Additional public transportation expense: If you claimed 1 or more vehicles in line 11 and if you claim that you may also deduct a public transportation expense, you may fill in what you believe is the appropriate expense, but you may not claim more than the IRS Local Standard for Public Transportation.

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Debto Debto	· · · · / = · · · · · · · · · · · · · · · · · ·					
Othe	Pr Necessary Expenses In addition to the expense deductions listed above, you are allowed your monthly expenses following IRS categories.	for the				
16.	Taxes: The total monthly amount that you actually pay for federal, state and local taxes, such as income taxes, self-employment taxes, Social Security taxes, and Medicare taxes. You may include the monthly amount withheld from your pay for these taxes. However, if you expect to receive a tax refund, you must divide the expected refund by 12 and subtract that number from the total monthly amount that is withheld to pay for taxes. Do not include real estate, sales, or use taxes.	\$1,767.28				
17.	Involuntary deductions: The total monthly payroll deductions that your job requires, such as retirement contributions, union dues, and uniform costs. Do not include amounts that are not required by your job, such as voluntary 401(k) contributions or payroll savings.	\$0.00				
18.	Life insurance: The total monthly premiums that you pay for your own term life insurance. If two married people are filing together, include payments that you make for your spouse's term life insurance. Do not include premiums for life insurance on your dependents, for a non-filing spouse's life insurance, or for any form of life insurance other than term.	\$31.48				
19.	Court-ordered payments: The total monthly amount that you pay as required by the order of a court or administrative agency, such as spousal or child support payments. Do not include payments on past due obligations for spousal or child support. You will list these obligations in line 35.	\$0.00				
20.	 Education: The total monthly amount that you pay for education that is either required: as a condition for your job, or for your physically or mentally challenged dependent child if no public education is available for similar services. 	\$0.00				
21.	Childcare: The total monthly amount that you pay for childcare, such as babysitting, daycare, nursery, and preschool. Do not include payments for any elementary or secondary school education.	\$0.00				
22.	2. Additional health care expenses, excluding insurance costs: The monthly amount that you pay for health care that is required for the health and welfare of you or your dependents and that is not reimbursed by insurance or paid by a health savings account. Include only the amount that is more than the total entered in line 7. Payments for health insurance or health savings accounts should be listed only in line 25.					
23.	Optional telephones and telephone services: The total monthly amount that you pay for telecommunication services for you and your dependents, such as pagers, call waiting, caller identification, special long distance, or business cell phone service, to the extent necessary for your health and welfare or that of your dependents or for the production of income, if it is not reimbursed by your employer. Do not include payments for basic home telephone, internet and cell phone service. Do not include self-employment expenses, such as those reported on line 5 of Official Form 122C-1, or any amount you previously deducted.	+ \$0.00				
24.	Add all of the expenses allowed under the IRS expense allowances. Add lines 6 through 23.	\$6,399.76				
Add	itional Expense Deductions These are additional deductions allowed by the Means Test. Note: Do not include any expense allowances listed in lines 6-24.					
25.	Health insurance, disability insurance, and health savings account expenses. The monthly expenses for health insurance, disability insurance, and health savings accounts that are reasonably necessary for yourself, your spouse, or your dependents.					
	Health insurance \$1,166.05					
	Disability insurance \$0.00					
	Health savings account + \$0.00	04 400 0 -				
	Total \$1,166.05 Copy total here →	\$1,166.05				
	Do you actually spend this total amount? No. How much do you actually spend?					
26.	✓ Yes Continued contributions to the care of household or family members. The actual monthly expenses that you will continue to pay for the reasonable and necessary care and support of an elderly, chronically ill, or disabled member of your household or member of your immediate family who is unable to pay for such expenses. These expenses may include contributions to an account of a qualified ABLE program. 26 U.S.C. § 529A(b).	\$0.00				
27.	Protection against family violence. The reasonably necessary monthly expenses that you incur to maintain the safety of you and your family under the Family Violence Prevention and Services Act or other federal laws that apply. By law, the court must keep the nature of these expenses confidential.	\$0.00				

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Debto		Tony Edward Giddens Terri Lynne Giddens			Case nu	mber (if known)		
28.		Additional home energy costs. Your home energy costs are included in your insurance and operating expenses on line 8.						
	If you believe that you have home energy costs that are more than the home energy costs included in expenses on line 8, then fill in the excess amount of home energy costs.							
		nust give your case trustee doo nt claimed is reasonable and r	cumentation of your actual expens necessary.	ses, and yo	u must sh	ow that the addit	ional	
29.	\$189.	-	nt children who are younger that your dependent children who are yool.		-			\$0.00
		3 ,	cumentation of your actual expens y and not already accounted for in			plain why the am	ount	
	* Subj	ject to adjustment on 4/01/25,	and every 3 years after that for ca	ses begun	on or afte	r the date of adju	ustment.	
30.	highe	r than the combined food and	nse. The monthly amount by whi clothing allowances in the IRS Na owances in the IRS National Stand	tional Stand				
		_	m additional allowance, go online may also be available at the banl	-		•	e	
	You n	nust show that the additional a	mount claimed is reasonable and	necessary.				
31.	instru	ments to a religious or charitab	ns. The amount that you will cont ole organization. 11 U.S.C. § 548	(d)(3) and (he form of cash	or financial	+\$400.00
32		of include any amount more that all of the additional expense of	in 15% of your gross monthly inco	ome.				
		nes 25 though 31.						\$1,566.05
Ded	luction	s for Debt Payment						
33.		ebts that are secured by an i , and other secured debt, fill	nterest in property that you own in lines 33a through 33e.	n, includin	g home m	ortgages, vehic	le	
	To calculate the total average monthly payment, add all amounts that are contractually due to each secured creditor in the 60 months after you file for bankruptcy. Then divide by 60.							
	Average monthly payment							
	22-	Mortgages on your home			_	\$0.00		
	33a.	Loans on your first two veh	ioloo		·······→ .	Ψ0.00		
	33h	•			_	\$395.00		
	33c.	.,				\$448.00		
	33d.	List other secured debts:						
	Name	e of each creditor for secured debt	Identify property that secures the debt	Does pa include insuran	taxes or			
	Conr	n's HomePlus	Household furnishings	<u>Ø</u>	No Yes	\$25.00		
					No			
				— <u> </u>	Yes			
				□	No +			
					Yes T		Copy total	
	33e.	Total average monthly payme	ent. Add lines 33a through 33d			\$868.00	here -	\$868.00

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Debto Debto		ny Edward Gio rri Lynne Gidd			_ Case n	number (if known)		
34.	-	-	eted in line 33 secured by your or the support of your de		nce, a vehicle	e, or other proper	rty	
	□ No. ▼ Yes.		unt that you must pay to a cre your property (called the cure					
Nan	ne of the c	reditor	Identify property that secures the debt	Total cure amount		Monthly cure amount		
					÷ 60 =		1	
					÷ 60 =			
					- ÷ 60 = -			
					_	\$0.00	Copy total here →	\$0.00
35.	-	that are past du	claimssuch as a priority ta e as of the filing date of you				,	
	□ No. ✓ Yes.		amount of all of these priority ing priority claims, such as th					
		Total amount o	f all past-due priority claims			\$8,000.00	÷ 60 =	\$133.33
36.	Projected	d monthly Chapte	er 13 plan payment			\$3,000.00		
	Office of t	the United States	listrict as stated on the list iss Courts (for districts in Alaban United States Trustees (for a	na and North Carolir				
	specified		ipliers that includes your distr structions for this form. This fice.	-		x <u>7.5</u>	%	
	Average i	monthly administr	ative expense			\$225.00	Copy total here	\$225.00
37.		f the deductions 33e through 36.	for debt payment.					\$1,226.33
Tota	al Deduction	ons from Income						
38.	Add all o	f the allowed ded	ductions.					
	Copy line	24, All of the exp	penses allowed under IRS exp	pense allowances		\$6,399.76		
	Copy line	32, All of the add	ditional expense deductions			\$1,566.05		
	Copy line	37, All of the dec	ductions for debt payment		4	\$1,226.33		
	Total ded	uctions				\$9,192.14	Copy total here	\$9,192.14
Pai	rt 2:	Determine You	ur Disposable Income (Under 11 U.S.C.	. § 1325(b)	(2)		
39.			nonthly income from line 14 It Monthly Income and Calc		•			\$11,232.61

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Debto		Tony Edward Giddens					
Debto	or 2	Terri Lynne Giddens		Case number (if kn	own)		
40.	The r disab you r	n any reasonably necessary income you receive for su monthly average of any child support payments, foster car bility payments for a dependent child, reported in Part 1 of received in accordance with applicable nonbankruptcy law conably necessary to be expended for such child.	e payments, or Form 122C-1, that				
41.	your plans	n all qualified retirement deductions. The monthly total employer withheld from wages as contributions for qualifies, as specified in 11 U.S.C. § 541(b)(7) plus all required re retirement plans, as specified in 11 U.S.C. § 362(b)(19).	ed retirement		.99		
42.		I of all deductions allowed under 11 U.S.C. § 707(b)(2)(→ \$9,192	2.14		
43.	expe circu expla	uction for special circumstances. If special circumstances and you have no reasonable alternative, describe the mstances and their expenses. You must give your case to anation of the special circumstances and documentation for scribe the special circumstances Amount	e special rustee a detailed	al			
	Stu	udent Loan	\$843.00				
		+ Total	\$843.00 Cop				
44.	Tota	l adjustments. Add lines 40 through 43		→ \$10,203	.13 Cop	-	_ \$10,203.13
45.	Calc	ulate your monthly disposable income under § 1325(b)	(2). Subtract line	44 from line 39.			\$1,029.48
Pai	rt 3:	Change in Income or Expenses					

46. Change in income or expenses. If the income in Form 122C-1 or the expenses you reported in this form have changed or are virtually certain to change after the date you filed your bankruptcy petition and during the time your case will be open, fill in the information below. For example, if the wages reported increased after you filed your petition, check 122C-1 in the first column, enter line 2 in the second column, explain why the wages increased, fill in when the increase occurred, and fill in the amount of the increase.

Form Line	Reason for change	Date of change	Increase or decrease?	Amount of change
122C-1 122C-2			Increase Decrease	
☐ 122C-1 ☐ 122C-2			☐ Increase ☐ Decrease	
☐ 122C-1 ☐ 122C-2			☐ Increase ☐ Decrease	
122C-1 122C-2			Increase Decrease	

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Debtor 1 Debtor 2	Tony Edward Giddens Terri Lynne Giddens	Case number (if known)
Part 4:	Sign Below	
By si	igning here, under penalty of perjury you declare t	hat the information on this statement and in any attachments is true and correct.
	s/ Tony Edward Giddens Tony Edward Giddens, Debtor 1	X /s/ Terri Lynne Giddens Terri Lynne Giddens, Debtor 2
D	Date 4/17/2023 MM / DD / YYYY	Date